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Commonwealth of Massachusetts



Executive Office Of Elder Affairs

Massachusetts Elderly Nutrition Program

Mitt Romney Governor

Kerry Healy Lieutenant Governor

Jennifer Davis Carey Secretary

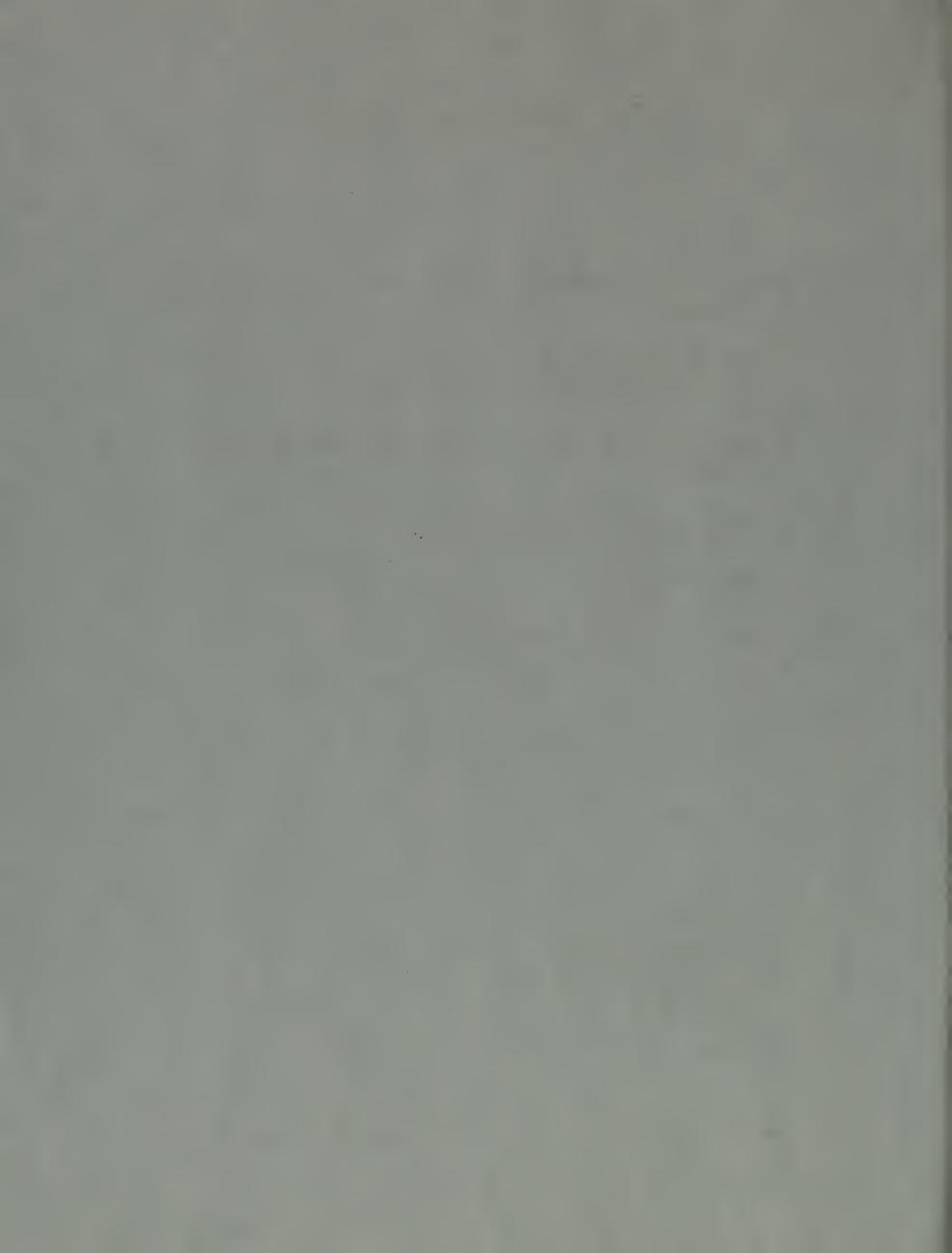


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Overview

Of the

Massachusetts Elderly Nutrition Program

Massachusetts Executive Office of Elder Affairs



PHILOSOPHY OF THE ELDERLY NUTRITION PROGRAM

The Nutrition Program for the Elderly is the largest community nutrition services program for older Americans administered by the Administration on Aging of the US Health and Human Service, through Title III-C of the Older American Act (OAA).

The Massachusetts Elderly Nutrition Project is the second largest program operated by the Commonwealth's Executive Office of Elder Affairs. Twenty-seven nutrition programs located throughout the state serve over eight and a half million meals to seniors each year. Meals are provided at more than 400 congregate meal sites and are delivered to frail elders in their homes. More than half of the total meals are served to homebound elders.

Nutrition Services helps to address a number of problems faced by many elders, including poor diets, health problems, food insecurity, and loneliness. Key nutrition services include nourishing meals, as well as nutrition screening, assessment, education, and counseling, to ensure that older people achieve and maintain optimal nutritional status.

A major goal of the Elder Affairs Nutrition project is to provide at least one nutritionally balanced meal per day to seniors either at a congregate meal site or through home-delivered meals. People age 60 or older and their spouses are eligible to receive nutrition services. A voluntary donation is requested.

The second goal of the Elder Affairs Nutrition Services is to assist older persons in maintaining independence so that they may continue to reside in their own homes for as long as possible.

In addition to the important dietary and social needs met by nutrition services, nutrition sites are encouraged to provide supportive services if needed and not otherwise available to participants. Such services may include information and referral, transportation, health screening, and recreation.

ELDERLY NUTRITION PROGRAM

WHAT IS THE ELDERLY NUTRITION PROGRAM?

The Elderly Nutrition Program is a federal and state funded nutrition program, administered by the Executive Office of Elder Affairs, which allows local elderly agencies to provide nutritious meals to senior citizens.

WHAT DOES THE ELDERLY NUTRITION PROGRAM PROVIDE?

Meals are provided at congregate meal sites and through home-delivered meals to senior citizens (age 60 or older) and handicapped or disabled people under age 60 who live in housing facilities occupied primarily by the elderly where congregate meals are served. Each meal contains at least 1/3 of the current daily Recommended Dietary Allowance of nutrients and considers the special dietary needs of the elderly. In addition to providing meals, the Elderly Nutrition Program also provides access to social and rehabilitative services.

CONGREGATE MEALS

The congregate meal program provides at least one meal per day at senior centers, churches, schools, and other locations. The congregate setting provides opportunities for socialization and companionship. It also offers programs related to nutrition education, exercise activities, health promotion and disease prevention. Some programs also offer meals on weekends. Transportation is often available for those who have trouble getting around on their own.

WHO QUALIFIES?

- 1) People age 60 or older, and their spouses.
- 2) Handicapped or disabled people under age 60 who live in housing facilities occupied primarily by the elderly, where congregate meals are served.
- 3) No income eligibility test is required.

HOME-DELIVERED MEALS

Home-delivered meals provide nutritious meals to elders who are unable to leave their homes due to illness, disability or frailty. Cold supper bags and weekend frozen meals are also available in some areas. Nutrition assessments and nutrition counseling are provided to the homebound elders who are at nutritional risk.

WHO QUALIFIES?

- 1) People age 60 or older and their spouses, and handicapped or disabled people under age 60 who live in housing facilities occupied primarily by the elderly if they:
 - a) Have physical, emotional, or cognitive impairments, or have inadequate kitchen facilities, resulting in an inability to prepare nutritionally adequate meals, and
 - b) Are unable to attend congregate meal sites, and
 - c) Have no one to help with meal preparation.
- 2) No income eligibility test is required.

Note: Home-delivered meals are also offered through the home care program for elders.

This is an integrated program that offers a broad range of services that includes case management, homemaker/personal care, companion service and respite care, and more.

HOW TO APPLY

- There are elder nutrition agencies located throughout Massachusetts. To find the nearest agency, call EOEA at 1-800-882-2003
- Call the local agency. The local agency can refer clients to congregate meal sites in their area over the telephone. Clients do not have to go to the agency office to apply.
- The agency will direct clients to call the site manager to let them know when they will be coming to that meal site. If clients call before noon, they will be able to receive a meal.
- If the client needs home-delivered meals, a program representative will arrange an appointment to meet with the client at home for a home-delivered meal assessment.
- Clients who appear to need additional services will be referred to a home-care program that will provide home-delivered meals in conjunction with other services.
- If the client's only need is home-delivered meals, a service plan will be developed based on nutritional needs. For example, a client may need frozen weekend meals in addition to weekday delivery.
- A donation of approximately \$1.50-\$2.25 is requested, but not required. All donations are strictly confidential.

MASSACHUSETTS ELDERLY NUTRITION PROGRAM

Nutrition

• Qualified nutritionists at each nutrition project

Each Project (routine):

- Monthly menu meeting
- Quarterly nutrients analysis
- Statewide nutritionstandards/menu policies
- Nutrition Assessment and Counseling program
- Nutrition education training
- Sites inspection
- Kitchen inspections
- Sanitation certification . program
- Electronic submission for QA report

Other:

- Statewide nutrition
 Campaign Water fountain
 of life
- EOEA quarterly nutritionists meeting
- EOEA monthly nutrition directors meeting

Food Distribution

- USDA commodity food and processing program
- USDA commercial distribution
- State purchasing program
- Paper consortium (projects)

Low income / Minority

- Farmers' Market Nutrition
 Program
- Brown Bag program with Food Banks (Monthly Grocery bags program for low-income elders)

Food Service

- Kitchen and sanitation standards
- Annual caterer's conference
- Standardized bid Specification
- School based elderly nutrition program
- Massachusetts's partnership of Sanitation Education

Meal services:

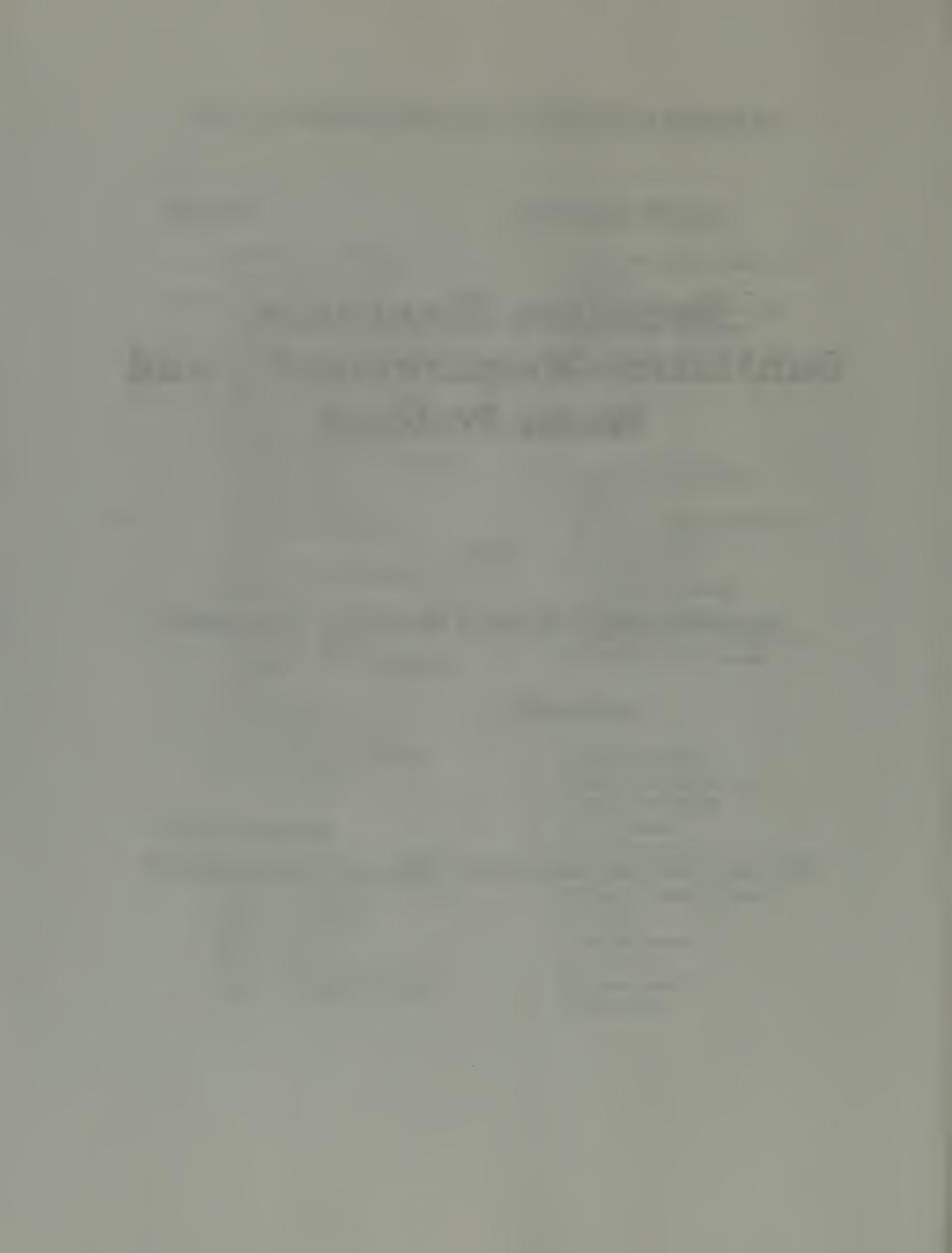
- Congregate meals
- Home delivered meals
- Therapeutic meals
- Frozen meals
- Weekend meals
- Supper meals
- Supportive housing meal programs
- Breakfast meals
- Lunch clubs
- Homeless meals
- Ethnic meals

Nutrition Standards, Sanitation Requirements, and Menu Policies

For

Massachusetts Elderly Nutrition Program

Massachusetts Executive Office of Elder Affairs



NUTRITION STANDARDS

- 1. The Federal Regulations governing the Nutrition program for the Elderly require that: Each meal served must contain at least one-third of the current Recommended Dietary Allowances (RDA) for meals 51 years + as established by the Food and Nutrition Board of the National Academy of Science, National Research Council:
 - * The caloric range per meal must fall between 700-800 calories.
 - * The **fat** content, based on total calories, must not exceed **30%-35%**.
 - * The **sodium** content of the meal must fall within the range of a **No Added Salt** diet (3-4 gm/day).
- 2. Meals may be provided hot, cold, frozen, dried, canned or in the form of supplemental food. Menus must comply with the *Elder Affairs Menu Policies and Nutrition Standards*, which incorporate the Dietary Guidelines of the US department of Agriculture/Health and Human Services and the Surgeon General's Report on Nutrition and Health.
- 3. Good food sources of vitamins A and C are required within the menu policy. A "good source" of a nutrient must contain 20% or more of the RDA. Good vegetable/fruit sources of vitamins A and C are listed in Appendix A. Foods high in fiber are additionally required. A high fiber bread is a bread/bread alternate (see Menu Specifications, List A, Breads) which provides at least 1 gram of dietary fiber per one ounce serving; a high fiber vegetable/fruit shall contain at least 2 grams of dietary fiber per serving.
- 4. Clinical diets prescribed by a physician should be planned to provide as close to the 1/3 RDA as possible. However, the 1/3 RDA requirement may be waived by the State if the clinical diet places significant restrictions on foods or components of foods based upon the medical needs of the participant(s). Additionally, the State may grant waivers regarding specific menu policies, concerning the 1/3 RDA requirement, for ethnic meals where for cultural or religious reasons, the State menu policies are not appropriate.
- 5. Religious, ethnic, cultural, or regional dietary requirements or preferences of a significant portion of the elderly population within a Program Service Area should be reflected in the meals served. Where feasible and appropriate, individual dietary needs may also be met.
- 6. Nutrition Projects shall have nutritionists who shall review menus to ensure the State Nutrition Standards/Menu Policies have been met. It is the responsibility of the Nutrition Project to ensure nutritional adequacy. Recommended qualifications for the position of nutritionist are: a Bachelor of Science Degree in nutrition, food service or related field. Area Agencies on Aging are responsible for monitoring that menus are reviewed by a qualified nutritionist and menus and nutrient analysis are submitted monthly to the State Nutritionist.
- 7. Nutritional analysis of meals shall be provided to the State Nutrition Department in the following instances:

A. Regular and Weekend Meals:

Once per fiscal year quarter, a complete nutritional analysis must be submitted for three consecutive days (which may include a higher sodium day) for:

- * Regular (main), weekday meals (served 5 to 7 days)
- * School meals (served 4-5 days per week)
- * Weekend meals other than limited selections (7 days)

Complete nutritional analysis should be submitted:

* December 31

March 31

* June 30

September 30

of each fiscal year.

Projects that provide weekend meals that are not limited selection (i.e., weekend menus that do not have a set, rotating selection) must include one weekend day within the three day analysis.

No more than one day per 3-day nutritional analysis may contain a processed entree.

**High Sodium Entrees

When an entree item contains more than 700 mg of sodium, the item is considered a high sodium entree and must be noted on the menu.

B. Limited Selection Meals:

Nutritional analysis for the limited selection menus must be submitted once per year, at the time of menu submission. Limited selection menus (with nutritional analysis) must be submitted to the State Nutrition Department each year at the end of the second fiscal quarter, March 31.

- Frozen meals including frozen ethnic meals Complete nutritional analysis
- * Ethnic meals (i.e. Kosher, Spanish, etc.)

3 days complete nutritional analysis

* Cold bag supper meals

1 week complete nutritional analysis

C. Other Meals:

A complete, three day nutritional analysis shall be required on a spot-check basis for the following meal types:

- * Homeless meals
- * Title IIIC Council on Aging Meals unless the Nutrition Project is a COA
- * Title IIIC School Meals (served less than 4 days per week)
- * Other Title IIIC meals programs
- 8. Requirements for complete nutritional analysis:
 - a) A complete nutritional analysis of the menu shall contain a minimum of: Macronutrients: calories, protein, fat (including the percentage of total calories from fat), Vitamins: A, B-6, B-12, C, and D, thiamin, riboflavin, niacin, and folate, Minerals: calcium, iron, Zn, and Mg, Others: cholesterol, dietary fiber, and sodium. The *Nutritional Analysis* Form or equivalent computer analysis sheet should be used for the submission of nutritional analysis. Nutrition projects are encouraged to utilize the nutritional information of the actual food products used. However, if sources of food products vary, an "average" nutritional analysis may be used (i.e. USDA Handbook No. 8.)
 - b) If a second (and third) meal is provided to any clients for consumption on the same day as the meal(s) mentioned above in 7-A, nutrient analysis shall be performed on the same Nutritional Analysis Form. For example, if an evening, multiple meal or breakfast menu is provided to clients in addition to a noon, regular meal, the second (and third) meal(s) should be submitted along with the "main" meals even if these meals are considered limited selection.
 - c) The specific meal(s), which are analyzed, may be chosen by the Nutrition Project. Different meals should be selected each quarter. (i.e. Analyzed meals may not be identical to those chosen previously.)
 - **d)** The State Nutrition Department may request that a nutritional analysis be performed on any meal, which appears not to meet State requirements, or for "spot-checking" purposes.
 - e) Nutritional analysis and/or full product descriptions for individual items used within Title IIIC meals must be provided or made available by caterers.
 - f) Consortium/Joint Menus (applies also to sodium analysis): Only one menu/nutritional analysis is required per menu cycle. It is the decision of the Nutrition Projects which agency(s) shall submit this information to Elder Affairs.

- g) Frozen Meals/ Limited Selection (applies also to sodium analysis): If more than one Nutrition Project provides the same frozen/limited selection meal, only one nutritional analysis needs to be submitted. It is the decision of the Nutrition Projects which agency(s) shall submit this information to Elder Affairs.
- h) The menu must be submitted to the State Nutrition Department at least four weeks prior to service, unless a waiver is granted (for schedule of submission, refer to *Nutrition Services Quality Assurance Protocol Schedule.*) Meals should be planned to contain variety in the areas of color, texture and food choice to enhance nutritional adequacy and participant acceptance.
- i) It is recommended that nutrition education programming is provided at least once yearly for both congregate and home delivered meals participants; monthly or quarterly nutrition education is encouraged. Nutrition Projects may arrange for qualified nutritionists or health educators from outside agencies (e.g. Cooperative Extension, The Massachusetts Chapter of the American Diabetes Society) to perform nutrition education.
- j) Meals to Cover Holidays: Nutrition Projects are encouraged, but not required, to provide meals for home delivered clients who do not have other sources of meal service during holidays when the Nutrition Project is closed (i.e. provide chilled, shelf stable or frozen meals for clients for the following day if the Nutrition Project does not deliver that day.) Home delivered meals clients shall miss no more than 3 days of meal service due to holidays.

KITCHEN FOOD HANDLING AND SANITATION REQUIREMENTS

Minimum standards:

1 The nutrition project's central kitchen, meal sites and caterers must meet the requirements regarding food handling and sanitation as stipulated within the Massachusetts Department of Public Health 105 CMR 590.000, State Sanitary Code for Food Establishments Chapter X and Vending Machines. Food preparation kitchens and meal service sites must have local Board of Health certificates and other applicable licenses.

II Food Protection Management:

A Nutrition projects and food preparation kitchens shall have at least one full time equivalent person in charge (PIC) who shall be an on-site manager, nutritionist or supervisor and at least eighteen (18) years of age, and must be a certified food protection manger who has demonstrated proficiency by successfully completing an exam that is part of an accredited program recognized by the Department of Public Health.

B Recognized providers for certified food protection (CFP) test are:

1 Certifying Board for Dietary Managers St. Charles, IL

2 Experior Assessments Clearwater, FL

3 National Registry of Food Safety Professionals (PTI)

Orlando, FL

4 National Restaurant Ass'n Educational Foundation

Chicago, IL

C Food Employee (Site supervisor) Training: all meal site supervisors must be trained in the minimum sanitation standards and receive regular, documented inservice training on proper food handling and sanitation practices. Site supervisors' job responsibility is limited to serving food and holding food at the proper temperature. No preparation or cooking is allowed. All site supervisors must demonstrate adequate sanitation knowledge according to their job responsibilities by passing a test (either oral or written) designed by the Massachusetts Executive Office of Elder Affairs. Department of Public Health has approved Elder Affairs' food safety curriculum and has worked very closely with Elder Affairs to identify training needs and monitoring procedures, which will be necessary to request a local variance for Elderly Nutrition state operations. Elderly nutrition programs will use this food safety curriculum to train all site supervisors in safe food handling

practices. The training records of each food-handling employee (site supervisor) will be maintained on-site for verification by the Board of Health. The training and certification must be conducted annually.

III Employee's Health

There are 76,000,000 foodborne illness cases each year in the US, causing 5000 deaths. Foodborne illnesses are transmitted through cross contamination of food, improper food temperature control, and food handlers' personal hygiene and medical condition. The BIG FOUR pathogens are *Salmonella* Typhi, *Shigella* spp., *Escherichia coli 0157: H7*, and hepatitis A. The Elderly Nutrition program is serving a highly susceptible population as defined in FC 1-201.10(B)(40). It is important for the Employees to report their disease or medical condition to the nutrition project person in charge (PIC).

A Who needs to report

- 1 Food employee applicants to whom a conditional offer of employment is made
- 2 Food employees
- 3 Volunteers who work or handle food.
- B When to report Employees need to report to the nutrition project person in charge (PIC) of:
 - 1 Diagnosis with an illness due to one of the following pathogens;
 - i Salmonella Typhi,
 - ii Shigella spp.,
 - iii Escherichia coli0157: H7,
 - iv **Hepatitis A virus**.
 - v Entamoeba histolytica,
 - vi Canpylobacter spp.,
 - vii Vibrio cholera spp.,
 - viii Crytosporidium parvum;
 - ix Giardia lamblia.
 - x Hemolytic Uremic Syndrome,
 - xi Salmonella spp. (non-typhi),
 - xii Yersinia enterocolitica.
 - xiii Cyclospora cayetanensis, and
 - xiv Any other disease transmissible through food so designated by the Division of Communicable Diseases of the Department in 105 300.000 et.seq., "Regulations Governing Reportable Illness".
 - 2 One of the following G.I. symptoms;
 - Acute gastrointestinal illness.
 - Diarrhea
 - Sore throat w/fever
 - Vomiting
 - Fever
 - Jaundice
 - ii Pustular lesions;
 - Represents a direct threat of introducing Staphylococcus aureus into food.

3 Past illness and

- An employee is ill if he/she has a <u>past illness</u> with one of the pathogens (diagnosis) mentioned above.
- 4 High-risk condition(s).
 - Causing or being exposed to a confirmed outbreak involving a BIG FOUR illness.
 - Living with person diagnosed with a **BIG FOUR** illness.
 - Living with person exposed to a confirmed outbreak caused by BIG FOUR illnesses.
- C How the Person in Charge (PIC) defines the condition:
 - 1 Definition of exclusion and restriction
 - (i) **Exclusion** The food employee is not allowed in any part of the food establishment where there is a possibility of transmitting the pathogen via food or person-to-person contact.
 - (ii) **Restriction** The food employee is limited to duties, which restrict from working with exposed food; clean equipment, utensils, and linens; and unwrapped single-service and single-use articles, in a food establishment.

2 When to exclude or restrict

Condition	Exclude	Restrict
Diagnosed with Big Four	X	
pathogens		
Acute GI symptoms only		X
Acute GI symptoms & high	X	
risk condition		
Asymptomatic & positive	X	
stool (salmonella, Shigella,		
E.coli)		
Past illnesses (salmonella ≤	X	
3 months;		
Shigella or E.coli ≤ last		
month)		
Jaundice	X	
Persistent sneezing,		X
coughing, runny nose		

- 3 Removal of exclusion and restriction 590.003(E) and 590.017
 - Freedom from symptoms
 - Board of health (Regulatory Authority definition set forth in FC 201.10) approval & Medical clearance

IV Standards for Massachusetts Elderly Nutrition Program

A Inspection: Every kitchen utilized for the preparation of Title IIIC meals shall be

inspected twice per year by the Nutrition Project/Area Agency on Aging using the Elder Affairs Kitchen inspection form. Inspections shall occur at approximately six-month intervals. Kitchen inspection schedules shall be submitted to the State by September 1 of each year. Copies of completed assessments are to be forwarded to Elder Affairs. Follow-up on issues, which are found to be out of compliance, must be clearly defined and rectified promptly.

- B Food temperatures: Temperatures of hot and cold foods shall be taken and documented daily before food leaves the kitchen. Temperatures must be 160°F or above for hot food and 40°F or below for chilled food. Temperatures should be taken, after packaging, as close to the time when the food leaves the kitchen, and not as food is removed from the oven or while it is in a steam table. Frozen meals should remain in a frozen state from packaging to delivery to the client.
- C Freezing meals: Nutrition Projects that provide frozen meals are encouraged to utilize commercially frozen meals, which meet the State Nutrition Standards. However, caterers and central kitchens may freeze meals but they must be approved by the Nutrition Project/Area Agency on Aging Nutritionist. Frozen meals must be dated, labelled and instructions provided for storage and reheating.
- D Meals not eaten at time of delivery: Home delivered meals which are intended to be eaten at a later time (evening, breakfast, holiday) must be delivered either chilled, shelf-stable or frozen and may not be delivered hot. Emergency meals must be shelf-stable. Meals that are intended for same day or next day use might be delivered chilled or frozen. Meals intended for use 2 or more days after delivery must be delivered frozen or shelf-stable.
- E Suspected outbreaks of food borne illness: Nutrition Projects shall promptly initiate investigations by local health authorities whenever complaints occur involving two or more persons who manifest the symptoms of food borne illness within a similar time frame after consuming Title IIIC meals. Nutrition Projects shall notify the Area Agency on Aging and Elder Affairs within 24 hours about the investigative actions taken. These agencies shall be regularly updated. Nutrition Projects shall document and keep on file, record of investigative actions taken and the findings of the investigation.
- F It is recommended that written procedures exist at the Nutrition Project for the collection of relevant information. Responsibilities for staff regarding the notification of Elder Affairs, the Area Agency on Aging and the local health authorities should be established. Site supervisors and other Nutrition Project staff should receive training about procedures in the event of suspected food borne illness or food spoilage/contamination.
- G If food spoilage or contamination is suspected as meals are delivered to congregate meal site(s) or to homebound clients, the food should not be served/delivered. It is recommended that Nutrition Projects conduct an internal investigation, including the verification of spoilage/contamination through laboratory analysis. Additionally, it is recommended that Nutrition Projects have written procedures for such internal investigations.
- H Sample meals: All kitchens providing Title IIIC meals shall freeze a sample meal (dated and labelled), which shall be retained for a period of one week.

- Packaging meals for transport: Meals must be packaged in heat retaining transport equipment, which maintains the food within the proper temperature range: Hot foods should be maintained at 140 °F or above; Chilled foods should be maintained at 41 °F or below. Frozen meals must be transported in a way, which keeps them frozen. It is recommended that milk and other potentially hazardous foods transported chilled (e.g. dairy desserts, cold salad meals) are packaged with ice or other similar, appropriate chilling material, especially during the summer months except when transported in refrigerated trucks.
- J Food storage: Food storage systems shall ensure a "First-In, First-Out" use of foods. All foods stored in freezers shall be dated and labelled.
- K Canned foods: Canned foods must be purchased in hermetically sealed containers from a licensed establishment. No home-canned foods shall be used.

MENU POLICIES

I. <u>Eligible Title IIIC Meals</u>: Meals served to eligible participants must provide one-third of the Recommended Dietary Allowances and meet the Elder Affairs *Nutrition Standards and Menu Policies*. "Seconds," snacks or portions of meals may not be counted towards meeting the 1/3 RDA requirement.

The following meals eligibility requirements need prior approval from the State Nutrition Department. The combined nutritional content is utilized to determine the number of eligible meals which may be counted for statistical purposes:

- Less than 1/3 RDA: not eligible.
- 1/3 RDA or more, but less than 2/3 RDA (for one or two meals served): one eligible meal.
- 2/3 RDA or more, but less than 100% RDA (for two or three meals served): two eligible meals.
- 100% RDA or more (for three meals served): 3 eligible meals.

The number of meals counted as eligible may not exceed the number of meals actually served, regardless of the nutritional contents.

- ✓ 2. <u>Vitamin/mineral supplements</u>: Vitamin or mineral supplements (e.g. multivitamin tablets) may not be provided with Title IIIC funds and may not be counted towards meeting the 1/3 RDA requirement.
 - 3. Menu cycles: Menus for weekday, noon meal service may be planned for a minimum of a four week/20 day cycle. No complete meal shall be repeated within that four week time period and efforts should be made to avoid duplicating entrees. Limited selection menus (typically, frozen, evening, multiple, and weekend meals) may have shorter menu cycles with a minimum of 10 days, unless a waiver is granted by the State Nutrition Department to repeat meals on a more frequent basis.
 - 4. Menu submission: Menus shall be submitted four weeks prior to service. The Elder Affairs menu submission form shall be completed for a Nutrition Project central kitchen or the largest caterer, whichever is applicable. Commodity foods shall be noted with an asterisk (*) and the average daily commodity use amount should be noted on the menu submission form. Other menus for small providers may be submitted (with attached sodium and nutritional analyses) in the form it is distributed to clients or other legible format.
 - 5. Participant input: Participants input must be incorporated into the menu design process. Nutrition Project Council, regular discussions with participants, site managers meetings, and observance of plate waste are several methods of receiving participant input concerning the meals. In addition, formal menu

- questionnaires/surveys shall be performed at least once per year with at least 50% of the congregate and home delivered meals clients.
- 6. <u>Substitutions</u>: Substitutions may be made from menus submitted to the state due to shortages or problems with food delivery to the kitchen or meal site. The substitutions should be as similar to the originally planned food(s) as feasible and kept to a minimum. Nutritionists and Nutrition Project Directors should design, with meal providers, a substitutions list or guidelines for substitutions. Substitutions should take into consideration the commodity usage of the originally planned meal and the nutrient content of the food(s) which must be replaced.
- Substitutions may only be performed by the contracted caterer of a Title IIIC Nutrition project or central kitchen prior to the meals leaving the kitchen. No substitutions may be made at any site other than the kitchen unless there is concern over food spoilage, contamination or a shortage has occurred, at which time the Nutrition Project must be notified immediately to evaluate whether any item(s) within the Title IIIC meal requires substitution.
- 7. Additions to the Meals: The following foods/beverages may not be added to the Title IIIC meal:
 - Alcoholic beverages.
 - Canned foods which have not been commercially canned (i.e. home-canned foods.)
 - Sweet desserts/breads, except for special celebrations or events.
 - Potentially hazardous foods, such as meat, eggs, fish, chicken, milk or dairy products, etc. which are not directly provided by the Title IIIC caterer or central kitchen.
- **8.** Special holiday meals: The holiday meals will be expected as part of the menu policy.

9. Meal patterns

A) Regular Meal (No Added Salt): The regular Title IIIC meal is part of a No Added Salt diet (3-4 grams of sodium per day). It contains no more than 1300 milligrams of sodium. Two days per month Nutrition Projects may offer a meal that contains up to 1800 milligrams. The Meal Pattern for the Title IIIC Nutrition program for the Elderly is described on the following page.

Regular pattern:

FO	OD GROUPS	AMOUNT TO USE
1. coo	Meat/meat alternate ked	One serving of 2.5* - 3 oz
2.	Vegetables/fruits	Two servings of 1/2 cup each
3.	Bread/bread alternate	One serving of 1 oz. or ½ cup
4.	Butter/margarine	Optional, one teaspoon
5.	Dessert	One serving of 1/2 cup
6.	Milk	One serving of 8 oz.

^{* 2.5} ounce minimum for list B entrees only. List A entree must contain at least 3 ounces of meat/alternate.

A food provided within a Title IIIC meal may be counted as only one Food Group. For example, juice served as one of the fruit/vegetable servings may not also count as a fruit serving for dessert.

Special changes: Changes in the regular meals may be offered where feasible and appropriate to meet the medical requirements of the client. These changes do not require a physician's approval:

- a) Changes in entrees: The client is provided with lower sodium entrees on the two days when higher sodium meals are served in order to provide a meal with no more than 1300 milligrams of sodium.
- b) Changes in milk: The client is provided with a low fat, skim or lactose-free milk.
- c) Changes in dessert: The client is provided with fresh or water packed fruit or other dietetic desserts instead of the regular dessert.

Meal pattern components

Meat or Meat Alternative:

Three ounces cooked edible portion of meat/meat alternate must be served for all List A items (see *Menu Specifications*, Entrees, List A.) Casserole, processed and ground meat items (see Menu Specifications, Entrees, List B) such as Italian dishes, macaroni and cheese, breaded fish square, etc. may contain a minimum of 2.5 ounces of meat/meat alternate. A minimum of 15 grams of protein shall be provided by the meat/meat alternate. The following meat alternates may replace one ounce of meat (poultry, beef, veal, fish.)

- 1 egg (maximum of 2 eggs per entree)
- 1 ounce cheese
- 1/2 cup cooked dried beans, peas or lentils
- 1 tablespoon peanut butter
- 1/4 cup cottage cheese
- 1 ounce tofu

Lower fat entrees are recommended, such as poultry, fish and lean meat products. Leaner cuts of meat with no visible fat or poultry skin aid in lowering the fat content of the entree.

When meat alternates are planned, sources of iron and other nutrients such as zinc, vitamin B6 and magnesium must be provided elsewhere in the meal. For example, planning an enriched or whole grain bread/alternate and iron-rich vegetables or fruits with a meat alternate entree would contribute toward attaining the 1/3 RDA for iron.

Gravies should be made in a way which reduces the sodium content as much as possible - for example, use 1/2 of the gravy base called for in a recipe or on package directions. The use of low-fat gravies is strongly encouraged. Nutrition Projects may require that low sodium and/or low fat bases are used in the preparation of meals.

When liver is served, it may fulfill all vitamin A requirements for that week.

The menu pattern contains 20 entrees per cycle. Entrees are categorized in the following way:

- a) Menus must include at least two A meats per week with a total of eight A meats per twenty day cycle. Ground, molded or pressed meats may not be used, e.g. turkey roll.
- b) Twelve entrees may be B meats.

Vegetables and Fruit:

Two servings of one-half cup each, drained weight should be included in meals. A good source of vitamin A should be served three times per week; a good source of vitamin C should be served daily. Instant mashed potatoes must be enriched with vitamin C.

Pasta, rice or stuffing may be served in place of one vegetable on an occasional basis, preferably no more than twice per week.

Lettuce alone may not count towards a vegetable/fruit serving, i.e., lettuce and tomato, tossed salad, may be served each as one vegetable/fruit.

Vegetable or fruit sauces, such as tomato sauce, can not count towards meeting the vegetable/fruit requirement.

Fresh or frozen vegetables shall be used. When canned vegetables are used, no salt should be added in cooking to minimize the sodium content. Vegetable cooking may occur on site as desired by the Nutrition Project.

A minimum of one high fiber vegetable a week, i.e., peas, corn, raw vegetables must be served.

All soups must be prepared utilizing minimal amounts of sodium, preferably homemade. In order to count soup as a vegetable serving the standard serving should be 6 fluid ounces (containing ½ cup vegetables.)

Only full strength fruit or vegetable juices may be used as a vegetable/fruit. Cranberry juice cocktail, enriched with vitamin C, may be served.

An extra vegetable/fruit (soup, juice, vegetable) will be served twice each month, preferably on casserole or pasta menus.

Enriched or Whole-Grain Bread or Alternate:

One serving enriched or whole-grain bread, biscuits, muffins, rolls, sandwich buns, cornbread and other hot breads should be included in meals daily.

Twice per month a bakery-type bread item such as a muffin, corn bread, and bran square shall be served.

Bread /bread alternates include:

- 1 slice bread
- 1 roll, muffin, biscuit
- 1 piece cornbread
- 1 sandwich bun
- 1 tortilla
- 1 ounce ready-to-eat, fortified cereal
- 6-8 ounces cooked cereal, cornmeal, grits, macaroni, noodles, rice, spaghetti (1/2 3/4 cup)
- 1 waffle, pancake
- 4 ounces starchy vegetable

Bread alternates are generally for use in ethnic, breakfast, evening or multiple meals program. Nutrition Projects may choose not to utilize alternates due to participant preferences. When a starchy vegetable is planned into the menu as a bread alternate, it may not also count towards meeting the vegetable/fruit requirement.

Whole grain, high fiber breads must appear at least three times per week (12 times per 20 day cycle). See Menu Specifications, breads, Lists A and B.

Desserts:

One serving of one-half cup should be included in meals daily (see *Menu Specifications*, Desserts, List A, B and C.) Fruit must be served as a dessert at least 3 times per week (list A.) It is recommended that fresh fruit is served at least once per week, subject to seasonal quality. Once per week a dessert containing a good source of calcium must be served (List C.) The remaining dessert may include a baked product or whipped dessert (List B.)

Nutrition Projects are encouraged to provide similar desserts for the regular and non-sweetened dessert menus. For example, when gelatin is on the regular diet menu, it is suggested that a no-sugar gelatin is served as an alternate.

- a) Fresh or canned fruits shall be served a total of twelve (12) times per twenty day cycle and at least three times a week.
- b) Desserts containing a good source of calcium must be served four times per twenty day cycle and a minimum of one time per week.
- c) Cakes, cookies, gelatin desserts may be served four times per twenty day cycle and no more than twice per week.

Butter or Margarine:

Nutrition Projects have the option to include one teaspoon of butter or margarine in menus. This policy is not to be interpreted as allowing individual participants to choose whether or not to take this item. Nutrition Projects are strongly discouraged from serving butter/margarine "family style" due to sanitary concerns.

Nutrition Projects may provide butter/margarine with all meals as a general policy, or may pre-set the items/meals in which butter/margarine shall be provided. For example, a Nutrition Project may specify that butter/margarine shall be provided when baked potatoes are served, and so on, according to the preferences of participants and to enhance the palatability of the meal.

Milk/Milk Alternate:

One- half pint whole, skim or low-fat milk fortified with Vitamins A and D should be offered daily. Low-fat or skim milk must be offered as an alternative to whole milk. Lactose-free milk may be offered. Milk alternates may be provided in place of milk.

In general, the use of milk alternates are not encouraged except for clinical or ethnic meals.

Milk Alternates:

- 1 cup yogurt
- 2 cups cottage cheese
- 8 ounces tofu (processed with calcium salt)

When milk alternates are used, the same foods may not also count towards meeting the meat alternate or calcium-containing dessert requirements.

B) Additional meal types:

- 1. Clinical: Clinical diets represent one classification of meals a Nutrition Project may offer to its participants by subcontracting with a facility under the supervision of a registered dietitian. These diets require a physician's authorization and may be provided only to those clients for whom the regular diet (and special changes) is inappropriate for medical reasons. Examples of clinical diets include: 1 gram sodium diets or renal diet.
- 2. Ethnic: Nutrition Projects are encouraged to offer when feasible to meet the ethnic makeup of elders within their PSA. Examples include: Hispanic, Chinese, Kosher and Southeast Asia meal programs.
- 3. Breakfast Meal: A recommended menu pattern for the breakfast meal is:
 - Meat and meat alternative one serving (egg, cheese, peanut butter, etc.)
 - Bread and cereal two servings (pancake, muffin, waffle, slice of bread, etc. /one serving of cooked or dry cereal)
 - Fruit or fruit juice one 4 ounce serving
 - Butter/margarine one serving (1 teaspoon), optional
 - Milk one-half pint
 - Optional beverages 8 ounces

Other menu plans may be used, however, to count as one meal, the breakfast menu must provide 1/3 RDA. Breakfasts provided to home delivered meals participants must receive prior approval from the State Nutrition Department before they may be counted as an eligible meal. The Nutrition project must have written criteria for providing breakfast meals for home delivered clients.

4. **Multiple Meals Program:** The Nutrition Project may offer a breakfast and supper ("multiple meals program") package. The multiple meals package is typically delivered with the noon meal. Projects offering this program must have written eligibility with the noon meal.

Multiple meals packages containing breakfast and dinner are generally considered as one eligible meal. Prior approval must be granted from the State Nutrition Department if a Nutrition Project wishes to count the package as two eligible meals.

- 5. Nutritional-Food Supplement: A nutritional-food supplement is defined as a supplemental food or beverage which is fortified with calories and nutrients and/or altered in texture or elemental nutrients, to meet the special dietary needs of clients with specific medical conditions. The use of a nutritional-food supplement shall be authorized by the participants' physicians. Nutrition Projects may provide this type of service in addition to providing a Title IIIC meal, or it may be used within the Title IIIC meal for clients which require this type of supplement for medical reasons. Nutrition projects must receive prior approval from the State Nutrition Department if a nutritional-food supplement is used within a Title IIIC meal.
- 6. **Frozen Meals**: The Nutrition Project may choose to deliver frozen meals to clients. For example, five or seven frozen meals once a week may be delivered to approved homebound clients. These clients must be assessed for the ability to handle the frozen meals.
- 7. Evening Meals: Nutrition Projects may choose to provide evening meals for congregate or home delivered meals clients. The Nutrition Project must have written criteria for persons receiving home delivered evening meals.
- 8. Weekend Meals: Weekend meals programs may be provided by Nutrition Projects in order to extend their 5-day per week programming. Written criteria for receiving weekend home delivered meals must be developed by the Nutrition Project.
- 9. Emergency Meals: All Nutrition Projects must offer all home delivered meals clients, at the time of assessment, a shelf stable emergency meal package, available for use during inclement weather or other emergency situations, when the Project is unable to deliver meals. Current clients who may require an emergency meals package may be identified by the case manager. Congregate meals participants should be advised to keep an emergency foods shelf at home in case of inclement weather.

The emergency meal package for home delivered meals participants shall be delivered to clients by November 1 of each year. The package should consist of two to three days of shelf stable foods and shall be replenished by the Nutrition Project.

It is recommended that the emergency meal package contain one-third RDA; the package should, as much as possible, match the regular menu pattern. An emergency meal package does not count as a meal(s) served. Dessert items may be dried or canned fruit. The no-added-salt policy is waived for these meals, however, low sodium items are encouraged. Persons requiring unsweetened foods must be

provided with appropriate items. An example of an emergency meal package (for each day) is as follows:

Sample Emergency Meal Packages (both acceptable):

- A) 1 can beef stew2 pkg. Melba toast1 box raisins1 can apple juice1 pkg. Nonfat dry milk
- B) 1 can spaghetti with tomato sauce 1 pkg. Saltines 1 pkg. Hot chocolate mix 1 small container applesauce
- 10. <u>Food Purchase Specifications</u> (for more information, see Appendix E, *Menu Specification Table*)
 - ◆ Poultry, eggs, dairy products US grade A; Chicken parts:IQF
 - ◆ Lamb, beef, veal USDA Choice, Hamburger 80/20 lean:fat
 - ♦ Pork USDA #1
 - Fish no more than 41% breading.
 - Vegetables Frozen, canned U.S. Grade A
 - ◆ Fresh Produce U.S. #1
 - Fruit U.S. Grade A
 - Milk Homogenized grade A Milk in individual containers.

USDA Commodity Foods

The provider shall receive, handle, store and utilize USDA commodities made available for Title III-C, in accordance with *State Policy and Procedure for Distribution and Control of Commodity Foods*. The provider agrees to comply with these regulations around the proper use, storage, loss or damage of commodities and recording/accounting procedures involved. The provider will be responsible to the Nutrition Project and the State Distributing Agency in the outlined areas of responsibility.

The provider recognizes the following responsibilities to be its own:

- 1. The provider will make use of available USDA commodity foods made available by the Nutrition Project. The provider shall submit monthly credit vouchers for commodity foods received. The provider must use a minimum of \$0.13 per meal for commodities for the month.
- 2. To confer with the Nutrition Program manager and nutritionist in the ordering of commodities in accordance with an accepted utilization rate and to work with the nutritionist in designing menus to incorporate the available commodities.
- 3. The provider shall properly store and mark for easy identification all commodity foods.
- 4. To sign for receipt of shipment of commodities and notify the Nutrition Project of such in writing.
- 5. The commodities to be credited will be the total value of the commodities received. Credit will be made on the month that the commodities are received.

Group Purchasing Program

The provider hereby agrees to purchase and use foods made available to the provider through the Department of Elder Affairs' Group Purchasing program. The Group Purchasing Program will arrange for certain foods suitable for use in the Elderly Nutrition program, such as chicken, to be made available at reduced prices for six to twelve month periods due to the Department's bulk purchasing power. The provider will not purchase such foods independently when food comparable in kind and quality is being offered through the Group Purchasing Program. The Group Purchasing Program applies to commercial products and not to USDA commodities.

The provider agrees to:

- 1. The provider shall purchase, handle, store and utilize foods made available through Elder Affair's Group Purchasing Program.
- 2. The Nutrition Project shall furnish the provider with information on the availability and prices of foods available through the Group Purchasing Program.
- 3. The provider shall confer with the Nutrition Program manager and nutritionist in the ordering of foods through the Group Purchasing Program and shall design menus to incorporate the available food from the Group Purchasing Program.
- 4. The provider shall make payment directly to the commercial distributor designated under the Group Purchasing Program within thirty (30) days of receiving shipment.

GOOD SOURCES OF VITAMIN A (per 1/2 c. serving):

Carrots Apricots

Mixed vegetables Pumpkin

Winter squash Nectarines

Avocado Sweet potato

GOOD SOURCES OF VITAMIN C (per 1/2 c. serving):

Asparagus Strawberries

Brussels sprouts Orange

Cabbage Grapefruit

Cauliflower Fortified fruit juices

Bean sprouts, 3-1/2 oz Honeydew melon

Bell pepper Canned pineapple (in juice)

Kohlrabi Okra

Potato

GOOD SOURCES OF VITAMINS A AND C (per 1/2 c. serving):

Cantaloupe Broccoli

Leafy green Kale

Romaine lettuce, 1-1/2 oz. Spinach

Tomatoes Tomato and vegetable juices

Mandarin oranges

NUTRITION SERVICES QUALITY ASSURANCE PROTOCOL SCHEDULE

	MENUS	KITCHEN INSPECTION (SUBMIT SCHEDULE 9/1 FOR FOLLOWING YEAR)	NUTRITION ANALYSIS
MONTHLY	Regular- Submit 4 weeks prior to service.		
QUARTERLY (12/31, 3/31, 6/30, 9/30)			Regular menus 3-consecutive days
BI-ANNUALLY		Regular, Nutrition Project, ethnic etc.	
ANNUALLY	Limited selection	AAA, Schools etc.	Limited selection menus
SPOT-CHECK	All	All	All

NUTRITION EDUCATION - Twice per year, submit schedule and topics on 9/1 for the following fiscal year.

SITE MANAGER TRAINING - Two to four times per year.

EOEA NUTRITION DIRECTORS QUARTERLY MEETING - September, March, December, and June.

EOEA NUTRITIONIST QUARTERLY MEETING - September, March, December, and June.

CONTRACT FOOD SERVICE REP SCHEDULE - Submit to EOEA no later than 2/1, unless having received prior approval from EOEA.

EOEA/MAENP CATERER'S TECHNICAL ASSISTANCE TRAINING - Submit no later than May.

NUTRITION PROJECT QUALITY ASSURANCE REPORT (CUSTOMER SATISFACTION SURVEY) - Submit to EOEA yearly (10/1).

MENU SPECIFICATION

ENTREE LIST A (Solid Meat)

BEEF, roast	Roast beef	
	Pot roast	
BEEF, cube	2 42	
	Beef Burgundy	
	Beef tips	
	Beef stew	
LIVER		100000000000000000000000000000000000000
PORK, roast		
	Roast Pork	
PORK,	Ham	
	Baked ham	
PORK, diced-		
	Sweet & Sour	
POULTRY		
	Chicken breast, leg	
	Baked	
	Turkey	
	roast	
FISH	turkey dinner	
1.1311	Unbreaded fish Baked Fish	

ENTREE LIST B (Casserole dish, ground meats, processed meat, and meatless dishes)

BEEF, ground			
, ,	Meatballs		
	Meat sauce		
	Meatloaf		
	Salisbury Steak		
	Stuffed Pepper		
	Chili		
POULTRY			
	Turkey, ground		
	60:40 beef: turkey		
	•		
	Chicken, diced		
	Chicken stew		
	Chicken A la King		
	Chicken Pot Pie		
MEATLESS/CHEESE			
	Vegetable Lasagna		
	Manicotti		
	Ravioli		
	Stuffed Shells		
	Macaroni/Cheese		
	Vegetable/Cheese bake		
	Vegetable primavera		
EGGS	Omelet		
	Quiche		
PROCESSED ENTREE			
	BEEF		
		Beef strip steak	
		Veal patty	
	PORK		
		Pork patty	
		BBQ rib	
		Pork breaded steak	
	POULTRY	6111	
		Chicken patty	
		Chicken nuggets	
	TYOYY	Breaded turkey	
	FISH	D 1 1 C 1	
		Breaded fish	
		Fish nuggets	
		Pollock fish/cheese	
		Broccoli/cheese fish	
MAID DIME DONA DE	DIANE	Lemon pepper fish	Careffeed
MAID RITE PREPARE	DLINE	Veal roulade	Stuffed pork chop
		Beef Wellington	Veal steak

BID SPECIFICATIONS

For

Massachusetts Elderly Nutrition Program

Massachusetts Executive Office of Elder Affairs



NOTICE TO BIDDERS

SEALED PROPOSALS ARE HEREBY SOLICITED FOR THE PREPARATION OF MEALS TITLE III-C NUTRITION PROGRAM, IN ACCORDANCE WITH SPECIFICATIONS.

PROPOSALS MUST BE SUBMITTED IN TRIPLICATE AND ENCLOSED IN A SEALED ENVELOPE MARKED "SEALED BID" AND ADDRESSED TO:

NUTRITION DEPARTMENT

A Bidders conference will be held on	_ at the offices of
The purpose of this conference is to give equal opportunity for clar specifications to all potential bidders. If you have any questions respecifications, reserve them for that occasion.	
Sealed bids will be accepted up to must be postmarked no later than received after that date endorsed or signed will be rejected.	Bids that are mailed Bids
EACTOROUS IN CELECTING THE PROTUR	r.p.

FACTORS IN SELECTING THE PROVIDER

- a) Meal Cost Analysis.
- b) Type of service offered.
- c) experience and reputation of bidder.
- d) Financial stability of bidder.
- e) Degree of staff supervision.
- f) Location and Food Production Facility.
- g) Ability to perform according to the requirements set forth.
- h) Ability to use USDA Commodity Foods.

_RESERVES THE

RIGHT TO REJECT ANY AND ALL PROPOSALS IF IN THE PUBLIC INTEREST TO DO SO.

SPECIFICATION FOR THE NUTRITION PROGRAM

In accordance with the goals and purposes of the Title III-c Elderly Nutrition Program established under the Comprehensive Older Americans Act Amendments of 1992,
has been established to meet the needs of Older Americans within its service areas. The Nutrition Program's chief responsibility is to provide nutritionally sound meals to those in the greatest economic and social need. These meals are served in strategically located centers, such as community centers, senior drop-in centers, churches, etc. They are also served to homebound elders within the service area. In addition to nutrition, the program aims at reducing the isolation of older Americans by providing these meals in a congregate setting whenever possible.

SPECIFIC INFORMATION

All bids shall be subject to review and acceptance by the
The Executive Office of Elder Affairs,
Commonwealth of Massachusetts shall have the rights to review and comment upon a
bids received.
reserves all rights and, in particular, the right to reject any and all bid
where there are sound business reasons in the best interest of the Nutrition Project for such rejection. Awards shall be made to the bidder whose bid or offer is responsive to the solicitation and is most advantageous to the nutrition project, meal cost, and other factors set forth on the previous page considered. Contracts shall be made only with responsible contractors who possess the potential ability to perform successfully under the terms and conditions of the procurement. A low bid will not necessarily be the deciding factor.

Each nutrition project contract with a provider for the preparation of meals for elders under Title III-C of the Older American Act shall include or incorporate by reference the following bid specifications:

All bids shall include evidence of ability and qualifications to deliver both bulk and pre-packed hot, chilled and/or weekend frozen meals in adequate quantity on a regular basis. This evidence includes prior and/or existing similar contracts as well as a copy of the bidder's most recent financial statement that reflects the capability of maintaining satisfactory operations for the contract period. A copy of the bidder's most recent annual report may also be included as documentation.

PERFORMANCE BOND

Within thirty (30) calendar days of the effective date of the contract, the provider shall procure, submit to EOEA and maintain a performance bond in the amount of one hundred thousand (\$100,000) for the three year contract life. If the contract is renewed,

such bond shall be extended for the appropriate time period. If the contract amount is for less than \$150,000 for the three year period, the minimum face amount of the performance bond shall be ten percent (10%) of the contract price rounded to the nearest thousand dollars. This bond shall be payable to compensate the nutrition project for its costs in selecting another provider if and when the provider terminates this agreement for any reason, other than the projects substantial failure to comply with the agreement with at least forty five (45) days advance written notice given, within the three year contract period, and any extensions.

TIMETABLE AND BASIS FOR CONTRACT AWARD

Due to the existence of potential contract termination provisions that may adversely affect the delivery of meals to elders, no caterer contract shall be awarded to a winning bidder prior to sixty (60) calendar days before October 1st, the beginning of the Federal Fiscal Year. Unless a more specific provision is set forth herein, any contract entered into between a Nutrition Project and a Caterer shall be consistent with and subject to the Commonwealth Terms and Conditions for Contracts.

CONTRACT DURATION AND TERMINATION

Subject to Federal and/or State regulations, the contract shall not be canceled by either party for the first thirty days, and may be canceled after that time by either party, with material cause, at the end of the calendar month by a notice in writing not less that thirty days prior to the termination date.

If the project determines that any non-compliance with the terms of this Agreement on the part of the provider endangers the life, health and safety of any recipients of services under this Agreement, it shall terminate this Agreement by orally notifying the provider of termination followed by the making of written notification, return receipt requested, setting forth the following the oral notification. Termination Pursuant to this subsection shall take effect upon the furnishing of the oral notification.

The project may terminate this Agreement, for reasons other than those constituting a non-compliance that endangers the life, health, and safety of recipients of service, if the provider has failed to comply with the provisions of the Agreement in whole or in part. However, Prior to terminating this Agreement pursuant to this subsection, the project shall notify the provider in writing, of the specific area of non-compliance. The provider shall restore compliance within thirty (30) days of the date of the notice. If the Provider has not restored compliance within the thirty (30) day period, the project may terminate this Agreement by furnishing the provider with written notice at least thirty (30) days prior to the effective date of termination.

The provider may terminate this Agreement prior to its expiration date, if the project fails to comply with a material provision of this Agreement. The provider shall furnish the project with written notice of termination at least forty five (45) days prior to the effective date of termination.

Upon termination, with at least forty five (45) days notice, the provider shall be entitled to compensation for services rendered in the satisfactory performance of this Agreement: provided that the provider shall submit properly completed invoices to the project covering services rendered not later than sixty (60) days after the date of termination.

If the provider shall terminate this Agreement with less than forty five (45) days notice or with no notice to the project, the project reserves the right to retain as a penalty an amount otherwise payable to the provider as compensation for services rendered. Such amount shall be that owed to the provider by the project for the calendar month, which preceded the effective date of the provider's termination. The Department of Elder Affairs shall approve the use of these funds by the project to offset the costs incurred by the project in the transition to a new provider on short notice.

Termination Without Cause. Either party may terminate the Contract without cause upon provision of written notice to the other at least sixty (60) calendar days before its effective date. Whether or not cause to terminate exists under any other provision, a party may elect to terminate without cause.

The term of this contract is for a period of three years. It is renewable with the agreement of both parties for two additional one year periods. There must be adequate provision, however, for cancellation of the contract in the absence of an appropriation of adequate federal funds or for other material cause. The area agency and/or the nutrition project must inform the Department of the details of the annual or other period contract amendments or modifications that occur during the life of the contract prior to the approval of these changes by the area agency.

The project may reclaim, upon the expiration of termination of this Agreement, all equipment, the cost of which is fully reimbursed by funds provided pursuant to this Agreement and which has a useful life of more that one (1) year and a cost in excess of one hundred (\$100.00) dollars.

NON-DISCRIMINATION IN SERVICE DELIVERY

The provider shall not deny any services to or otherwise discriminate in the delivery of services against any person who otherwise meets the eligibility criteria for the program as determined by the project on the basis of race, color, religion, sex, age, national origin, ancestry, physical or mental disable or because such person is a recipient of Federal, State or local public assistance or housing subsidies.

The provider shall comply with all applicable provisions of:

- a) Title VI of the Civil Rights Act of 1964 (42 USC 2000d et seq.) prohibits discrimination on the basis of race, color, or national origin, in programs receiving Federal financial assistance: and
- b) Section 504 of the Rehabilitation Act of 1973, (29 USC 794) and the regulations promulgated thereunder, (45 CFR Part 84) prohibits discrimination against qualified disabled individuals on the basis of disability in any program or activity receiving or benefiting from Federal Financial assistance and requires programs and activities, when viewed in their entirety, to be readily accessible to disabled persons; and
- c) G.L. c.151B sec. 4(10) prohibits discrimination in furnishing services on grounds that an individual is a recipient of Federal, State of local public assistance or housing subsidies.
- d) The provider shall comply with all applicable provisions of the Americans With Disabilities Act.

Non-Discrimination In Employment

The provider shall not discriminate against any qualified employee or applicant for employment because of race, color, national origin, ancestry, age, sex, religion or physical or mental disable. The provider shall comply with all applicable provisions of:

- a) Title VII of the Civil Rights Act of 1964 (42 USC 2000e et seq.) prohibits discrimination in employment on the basis of race, color, religion, sex or national origin; and
- b) M.G.L. c.151B, S4(1) prohibits discrimination in employment on the basis of race, color, sex, religion, creed, national origin, ancestry, age, or handicap.
- c) The Department of Elder Affair's Regulation 651 CMR 8.00: Discrimination Based On Age In Agencies And Organization In Receipt of Funds From The Department of Elder Affairs.
- d) Section 504 of the Rehabilitation Act of 1973 (29 USC 794) and the regulations promulgated pursuant thereto (45 CFR Part 84) prohibits discrimination against qualified disabled individuals on the basis of disability and requires employers to make reasonable accommodations to known physical or mental limitations or otherwise qualifies disabled applicants and employees.
- e) The provider shall give written notice of its commitments under this Article to any labor union, association or brotherhood with which it has a collective bargaining or other agreement.

- f) The provider shall notify minority, disabled, and women contractors, and associations of such contractors, that it is the policy of the Commonwealth to prohibit discrimination in employment practices by providers, subcontractors, and suppliers of goods and services as set forth in Executive Order 11246.
- g) The provider shall comply with all applicable provisions of the Americans With Disabilities Act.

Affirmative Action

- 1. The provider shall develop and adhere to a policy of affirmative action in all aspects of employment under this Agreement. In addition, if the maximum compensation paid to the term of this Agreement, from agencies acting pursuant to contracts with the Department of Elder Affairs, is fifty thousand dollars (\$50,000) or more, the provider shall develop and maintain an affirmative action plan in accordance with the applicable requirements of Executive Order 116 and transmit a copy to the project.
- 2. The provider as an organization receiving federal funding shall take all necessary affirmative steps to assure that minority firms, women's business enterprise, and labor surplus area firms are utilized in the subcontracts in accordance with 45 CFR Part 92.36 (e). Affirmative steps shall include:
 - a. placing qualified small and minority businesses and women's business enterprises on solicitation lists; and assuring that small and minority businesses, and
 - b. women's business enterprises are solicited whenever they are appropriate for the type of goods or services contracted for.

ACCOUNTABILITY

The provider shall comply with all applicable Federal, State, and local government laws and regulations pertaining to wages and hours employment. Particular reference is made to Title 45 Code of Federal Regulations Part 74 Administration of Grants Subpart P Procurements by Grantees and Subgrantees appendix h Paragraph 4 which is applicable to all providers and specifies particular provisions that must be included in the prospective contract. Particular attention is drawn to sub paragraph 4(I) which requires that all provider contracts contain a provision allowing the nutrition project the area agency, the State Department of Elder Affairs, the Administration on Aging or any of their duly authorized representatives to have access to any books, documents, papers and records of the contractor which are directly pertinent to the specific program for the purpose of making audits, examinations, excerpts and transcriptions. The provider shall retain all such books, records, documents, and property for six years after final payment hereunder.

The provider shall carry and furnish evidence of public liability insurance including bodily injury and property damage coverage, as well as product liability insurance. Certificates of insurance are to be provided.

The provider shall indemnify the e project against any loss and/or damage (including attorneys fee and other costs of litigation) caused by negligence or omission, theft by their employees, or the negligence acts or omissions of the provider's agents or employees.

The provider shall defend any suit against the project alleging personal injury or property damage out of the consumption of the meals prepared by the provider and served by the project.

CONFIDENTIALITY

With regard to personal data maintained pursuant to this Agreement, the provider is a holder of personal data as that term is used in MGL c. 66A, the Fair Information Practices Act, and in the regulations of the Executive Office of Elder Affairs, governing the safeguarding, use of, and access to personal data, 651 CMR 2.00 et seq.

METHOD OF PAYMENT, PAYMENT SCHEDULE

The provider will furnish the project a monthly invoice and copies of detailed statement of operation no later than the twelfth (12 th) of the month following each month of service. Accounting periods are to relate to the project year. Monthly statements are to include the total costs of the operation with a breakout of raw food cost and other meal related costs.

Billing statements will calculate cost for all meals served on an individual day by day basis for all days in the calendar month, including weekdays and holidays.

Payment by the project shall be due for each calendar month upon the expiration of 30 days after the receipt the project of a proper invoice from the provider. If payment is not made in or within the due date, the provider may, so long as such non-payment shall continue, terminate this agreement as to the further providing of meals herein only by the giving of 30 days period, terminate, otherwise it shall continue in full force and effect.

SANITATION AND FOOD HANDLING REQUIREMENTS

The provider shall comply with all Federal, State, and local laws and regulations governing the preparation, handling, and transporting of food, shall procure and keep, in effect, all necessary licenses, permits and food handler's cards as are required by law, and shall post such licenses, permits and cards in a prominent place within the meal preparation area, as required.

The provider shall maintain all food preparation and delivery facilities over which it has control in clean and sanitary conditions. All kitchen storage and delivery facilities, including equipment, utensils, ventilating equipment (including filters), door cabinets. counters, and the like, shall be clean and sanitary.

The provider shall, as part of its bid proposal, provide the project with a written kitchen audit by a independent qualified sanitarian, validating the safe maximum meal production load for the provider's kitchen facility(ies). No provider receiving payment under this Agreement shall enter into any Title III-C nutrition contract in which it exceeds the safe maximum meal production load for its kitchen facility (ies).

The provider shall maintain a written documented formal sanitation program which meets or exceeds the minimum requirements of State, Federal, municipal or other agencies authorized to inspect or accredit the food of the project at the latter's discretion. The provider shall provide regular, documented in-services regarding sanitation and food handling to its employees involved in the preparation, handling and storage of food. Additionally, the provider shall present no fewer than two trainings per year for project staff or volunteers, as designated by the project, trainings on sanitation and food handling issues.

The provider will report the location in or adjacent to Massachusetts of its current food preparation sites and submit a copy of the most recent inspection report by State or local health departments of the preparation sites to be utilized under the proposed contract.

Each meal served must contain required one-third of the current Recommended Dietary Allowances as established by the Food and Nutrition Board, Commission on Life Sciences, National Research Council and must meet the nutrition standards and menu policies as outlined by the Executive Office of Elder Affairs.

The project shall have the right and authority:

- 1. To develop and supply to the provider, prior to the beginning of operations, under this agreement, specifications for the food, which the provider is to use in the meals, and other food prepared for the project.
- 2. To inspect such food to determine compliance with the specifications for the food, which the provider is to use in the meals, and other food prepared for the project.
- 3. To have access to the provider's purchase records, bearing upon the food purchased for the project, for review and audit, as necessary.
- 4. To supply and approve the menus and recipes for meals and other food to be delivered so as to ensure compliance with the department of health and Human Services; to inspect the meals delivered to determine compliance with the department of Health and Human Services' and Elder Affairs' meal type

requirements; and to withhold payment for meals not meeting prescribed requirements.

- 5. To inspect, at any time, the provider's food preparation, packaging and storage area to determine the adequacy of the cleaning, sanitation, and maintenance practices.
- 6. To determine the adequacy of the providers' storage and record keeping practices so as to ensure the safekeeping of all food, including the food denoted for the use of the project as USDA commodity food, and in connection therewith to have ready access to the related food inventory control records of the provider.
 - a. Temperatures must be taken before food leaves the kitchen and documented. Temperatures and provider vehicle condition will be subject to daily checks by the project's staff or personnel and the provider's failure to comply with these requirements will result in returned food.

The following temperature requirements must be maintained:

- Hot foods shall be packed at a temperature of at least 160 F and delivered in temperature-retaining containers, serving temperature to be at least 140 F. Potentially hazardous foods that are to be served hot and have been previously cooked and then refrigerated shall be reheated rapidly to an internal temperature of 165 F or higher.
- Cold foods shall be kept at 40 F or below during transportation, storage and serving. Potentially hazardous foods that are to be served cold must be transported pre-chilled and held at a temperature of 40 F or below.
- Frozen foods shall be kept frozen and held at air temperatures of 0 F or below during packing, transportation and storage except for defrost cycles and brief periods of loading or unloading.
- Raw fruits and vegetables may be held at room temperature.

USDA DONATED FOODS

The provider shall utilize all USDA Donated Foods made available and to credit the nutrition project at full USDA value. Appropriate records USDA credits and cash must be maintained.

The provider shall allow to the project a credit equal to the value of the USDA commodities for those commodities that are furnished to the provider for use in the program.

GROUP PURCHASING PROGRAM

(PLEASE NOTE THIS IMPORTANT REQUIREMENT THAT MAY AFFECT YOUR STATUS AS A MEAL PROVIDER).

The provider must agree to utilize the Department of Elder Affairs Group Purchasing Program. This means that the provider will utilize the Group Purchasing Program's foods. to the extent and frequency set forth in the Department's Nutrition Standards, Menu Policies and Sanitation Requirements which are incorporated herein by reference.

The provider shall make payment directly to the commercial distributor designed by the Department under the Group Purchasing Program within (30) days of receiving shipment. In the event that the Provider cannot or does not make payment within thirty (30) days of receiving shipment, either the Commercial Distributor or the provider shall notify the Nutrition Project and the Department of this fact as soon as possible.

Personnel

- 1. Food Service Manager The provider shall maintain a competent, full time food service manager/supervisor whose responsibility is the execution of the meal service program. The manager must be free to visit meal sites frequently and be daily available and responsive to monitor food service related problems and concerns.
- 2. Nutritionist The provider shall maintain on its staff a qualified nutritionist. The nutritionist may be shared with other provider food service programs, but must be available for menu development, nutritional analysis of menus or food products used within meals and any other related matters i.e., sanitation training.
- 3. The Provider must maintain an adequate amount of personnel in order to meet all of the specifications and responsibilities of the submitted bid in an orderly, punctual and reliable manner.
- 4. Provider personnel shall always present themselves in a clean and professional appearance. The utilization of uniforms is encouraged.
- 5. All management-level employees shall be employed by the provider, who shall specify the number of such employees and their titles. The provider's organizational chart shall accompany a bid for food service catering.
- 6. The project shall provide other employees and personnel as it may deem necessary for the on-site service of the meals and maintenance.

7. The project shall furnish the provider with a list of all sites with addresses and the following: number of serving days, number of congregate meals and number of home delivered meals.

TRANSPORTATION OF FOOD

Bidders shall submit with their bid, information concerning the type, number, model, year and condition of the vehicles to be used in the nutrition program. The information should also indicate whether these vehicles are capable of transporting all equipment owned by the project.

At the beginning of the contract year the project and the provider will set up a definite delivery schedule. It is the provider's responsibility to assure that home delivered meals arrive at the drop off locations at the temperatures specified within this Agreement.

The provider should take all necessary measures for the protection of the clod packs i.e., by use of heat seal packaging and/or wax lunch bags, etc. The project will assume responsibility for maintaining the temperature of home delivered meals on route to the homes.

The project will be responsible for the purchase of all food delivery containers/carriers.

1. Congregate Meals: Food shall be delivered for use at congregate sites in bulk. It shall be packaged so that there will be a minimum of spills in the carrier. The provider shall take any necessary measures including, but not limited to, reducing fill level, and covering pans with stretch plastic, aluminum foil and/or metal lids.

The provider shall deliver all foods in supplied appropriate containers to specified locations in such a manner that the food may in clean and sanitary conditions. Temperatures must be taken before food leaves the kitchen and at arrival to sites and documented.

2. **Home Delivered Meals**: It is the caterer's responsibility to assure the meals arrive at the central pick-up point at the appropriate temperatures. The Project will be responsible to maintain the temperatures of the home delivered meals on route to the homes.

LOCATION OF FOOD PREPARATION KITCHEN(S)

In addition to evaluation of all other criteria, the Nutrition Project shall review whether or not the bidder's kitchen(s) for preparing food under this agreement is/are located within 60 miles of the furthest location at which such foods shall be served to program participants in each particular project area.

If such kitchen(s) are beyond 60 miles, and that bidder is selected to receive the contract, the Nutrition Project must be prepared to justify to EOEA the reasons for selection of such bidder.

EQUIPMENT AND SUPPLIES

Adequate hot and clod food delivery equipment shall be purchased, owned and supplied to the provider by the project. Only the project will purchase any additional or replacement equipment. An inventory of existing equipment will be taken and verified jointly by the project and the provider at the commencement of operations. At the termination of operations, all equipment owned by the project shall be returned.

Closed insulated carriers only may be used, none with an open flame or sterno. These must maintain a temperature of over 140 degrees for at least three hours.

RESERVATION SYSTEM:

The caterer shall accept meal count changes up to 24 hours prior to meal service. All Projects shall have a minimum 24-hour documented reservation system in place.

Meals ordered should match the number of meals expected to be served as closely as possible under the 24-hour reservations system. If extra meals should be available because of the absence of scheduled participants, seconds may be served to be eaten at the site. Hot cooked or other prepared food must not be taken from the site by participants, and if not eaten at the site must be discarded.

EMERGENCY PROCEDURES

The provider shall provide immediate reimbursement for any out-of-pocket expenses incurred by the Project when replacing part or all of a meal that is not delivered or is not wholesome. The project shall pay the provider for the meals provide and shall bill the provider for expenses incurred for replacement food.

It is the responsibility of the Provider and the Project to notify each other prior to 6:30 a.m. of a site closing due to hazardous weather. Any food already prepared will be promptly frozen or refrigerated, and if appropriate, that day's menu will be substituted for the following day's menu. If food is lost due to closings the financial burden lies primarily with the provider. However, the provider may negotiate with the project to help pay some of these costs.

MISCELLANEOUS

The provider shall not disseminate, reproduce or publish any report, information, data, or other documents produced in whole or part pursuant to the terms of this Agreement without the prior written consent of the project nor shall any such report,

information, data or other document be the subject of an application for copyright by or on behalf of the provider without the prior written consent of the project.

The provider will submit a copy of the most recent financial statements to reflect its capabilities to maintain operators satisfactory for the contract period.

The provider shall not assign or subcontract any interest in this Agreement without the prior written consent of the project, provided that, claims for money due or to become due to the provider from the project under this Agreement may be assigned to a bank, trust company or other financial institution without such promptly to the project.

The provider shall not knowingly employ, compensate, or arrange to compensate any employee of the project during the term of this Agreement without the prior written approval of the project.

This Agreement may be amended only by written document signed by persons authorized to bind in contract the project and the provider. All amendments must be attached to this Agreement.

Unless otherwise specified herein, any notice, approval, request or demand thereunder from either party to the other shall be in writing and all bee deemed to have been given when either delivered personally or deposited in a United States mail box in a postage prepaid envelope addressed to the other.

The provider shall procure and keep current any license, certification, permit or accreditation required by local, State or Federal statute or regulations and shall, upon the request of the project, submit to the project proof of any such license, certification, permit or accreditation.

All attachments to this Agreement are deemed to be part of this agreement. The entire Agreement of the parties is contained herein and this Agreement supersedes all oral agreements and negotiations between the parties relating to the subject matter contained herein.

MEAL COST ANALYSIS

Number of Meals

The bid must submit a range of meals per day utilizing the attached Meals Cost Analysis form provided within this document.

The number of meals category will range from approximately 100 meals below the project's current rate to 100 meals above the current rate. The number of daily meals, which a project anticipates over the duration of the contract, should take into account possible fluctuations in funding levels from state and other sources.

The project may issue either a single bid or a consortium bid with another project(s) or both. However, a project may not issue a bid request which allows bidders to elect the type of bid (i.e., joint or single) they shall respond to. This stipulation is intended to avoid circumstances wherein a project can not properly compare submitted bid proposals due to varying assumptions on the number of meals to be provided and other requirements which would differ between joint and single bids.

Unanticipated expansion of meal sites or other factors which may increase the number of meals, or events which cause the unanticipated decrease in the number of meals, shall be accommodated by the provider and the price per meal shall be adjusted, by negotiation with the project, to take these changes into account.

Determining Base Cost

The following factors must be taken into account in determining the base cost:

- 1. Raw Food Cost All menu specifications as listed, including condiments.
- 2. Labor Cost Production, Preparation, Service, Packaging, Food Service Management, Transportation Labor (drivers), and Nutritionist.
- 3. Administration Administrative Salaries, Travel, Fees, Insurance, Office Supplies, Postage, Printing, Misc., Rent, Utilities, Telephone, Maintenance, Equipment Repairs, Small Equipment, Garbage Collection, Extermination, Trainings.
- 4. Transportation Gas, Oil, Van Maintenance, Depreciation, Insurance (van).
- 5. Disposable Cost Disposables, Napkins, Wrap, Site Supplies, Misc. Includes storage and handling of disposables unless project picks-up and stores own disposables.

<u>Disposables</u>

If disposables are included in the meal cost a separate cost sheet should be attached with the samples of the products. The sheet should show the cost per unit for the item (divide the number of items in the case by the cost per case). The provider should also list his percentage cost for the handling and distribution of disposables.

NUTRITION PROGRAM'S RIGHT TO SELF-PURCHASE

The project reserves the right to self-purchase individual meal products, such as hot beverages, disposables and site supplies directly from the purveyor instead of from the caterer. If the purchase is from the purveyor or the caterer, the caterer will be responsible for receiving, storing, securing and distributing products to meal sites. Storage and distribution cost is separates from the Base Cost. (Enter percentage for this service in the disposables line on meal cost analysis sheet.).

Caterer's Conference Selecting the Provider

All bids are subject to review and a low bid will not necessarily be the deciding factor.
 Awards will be offered to the caterer whose bid is most advantageous to the nutrition project not only in terms of meal cost but these following factors.

Meal Cost Analysis

• Determining the base cost includes: raw food, labor, administration, transportation, disposables. The meal cost should be realistic but also needs to fit within programs budget.

Type of service offered

 Demonstrated ability to provide all services as spelled out in the RFP while maintaining proper food sanitation and handling requirements.

Experience and Reputation of the Bidder

• Has demonstrated experience with similar contracts and provides contact names for references.

Financial Stability of Bidder

• Review of the bidder's most recent financial statement and annual report.

Degree of staff Supervision

- Organizational chart should be provided. This should include management staff, their titles, and where these people will be located. Also include list of the number of employees necessary for on-site meal preparation, delivery, cleaning, and clerical support staff.
- What is the opening team for this account? Is this support local?

Location and Food Production Facility

- Facility must be located within 60-mile distance of the furthest location that food must be delivered.
- The provider will provide the location of its current preparation facilities and proposed production for this bid. Recent inspection reports by local and State boards of health should be provided.
- The bidder should provide a written kitchen audit by an independent qualified sanitarian, validating the maximum number of meals that can be produced in the facility safely.

Ability to perform according to the ENP Requirements

- Each meal served must comply with nutrition standards and policies of the program.
- Food purchased must meet Nutrition Standards and caterer must be willing to utilize the State Group Purchasing foods.

Ability to use USDA Commodities

 Willingness to use all donated commodities available and to credit the nutrition project full value



USDA Commodity Program

For

Massachusetts Elderly Nutrition Program

Massachusetts Executive Office of Elder Affairs



USDA Commodity Program

BACKGROUND

The Commonwealth of Massachusetts Elderly Nutrition program provides more than 7,900,000 meals per year to senior age 60 years and older through a statewide network of 28 nutrition programs operated by nonprofit Area Agencies on Aging.

Approximately 30% of the 8,500,000 meals are provided to groups of elders at more than 400 locations throughout the Commonwealth. The remaining 70% of meals are delivered to frail elders in their homes usually in conjunction with other services provided through non profit Home Care Corporations.

A majority of the 27 nutrition programs hold contracts with food service management companies and school food services to prepare meals for group sites and home delivery. The other nutrition programs prepare meals at kitchens owned or leased by the nutrition programs themselves or by another agency such as a school department.

The Elder nutrition program's meals are funded through a combination of federal and state appropriations, as well as donations from seniors using the program. In addition, the Food and Nutrition Service of the U.S. Department of Agriculture provides the Commonwealth with approximately \$1,250,000 worth of donated foods, referred to as "commodities" or "commodity foods".

These commodity foods are acquired by the USDA through various specialized federal agencies involved with surplus agricultural products and farm price support programs. Commodity foods include meats, poultry, fish, fruits and vegetables, as well as grain, oil, peanut and dairy products.

The Massachusetts Elderly Nutrition program benefits from the use of USDA commodity foods because these products are purchased at below-market prices and therefore help keep meal preparation costs reasonable. Also, when Massachusetts as a whole uses a targeted amount of commodity foods, the nutrition programs are able to <u>receive</u> "bonus" commodities at no cost to their programs.

A portion of the commodity foods, via a separate contract between Elder Affairs and a food processing company, are prepared as food products that are usable and convenient for the food preparation sites. For example, ground turkey may be sent to the food processor to be prepared as meatballs for delivery to the food preparation sites.

Until FY 89, the Elderly Nutrition program obtained USDA commodity foods through the state's designed public Distributing Agency, namely the Massachusetts Department of Education. The Department of Education contracted with private warehousing companies to receive the shipments of commodities and store them pending delivery to the individual nutrition programs. The programs themselves were responsible for arranging for the warehousing company or another trucking company to deliver the commodity goods to the food preparation sites.

COMMERCIAL DISTRIBUTION

In FY89, elder Affairs began a pilot program to demonstrate the improved services and cost effectiveness of using a commercial food distributor to receive, store, and distribute USDA commodities directly to the Elder Nutrition program rather than through the Department of Education-contracted warehouse system. Initial results encouraged Elder Affairs to expand this initiative statewide in FY90.

In FY90, Elder Affairs Request for Proposal for a commercial distributor. By employing a commercial distributor, costs were lowered. In addition to reducing costs, a number of other barriers were eliminated. The Executive Office of Elder Affairs and, through it the Elder Nutrition programs, became one of the primary service recipients of the distribution company.

As a result, Elder nutrition programs no longer had to fit into the schedule or policies for another organization. Weekly delivery and monthly inventory systems were instituted, eliminating storage problems that had previously been experienced by some sites, and increasing knowledge of product availability.

The commodity foods are ordered by Elder Affairs on behalf of the 27 nonprofit agencies which serve as the Massachusetts Elderly Nutrition Program. The vendor(s) receiving this contract will be responsible for storing and delivering commodities to 83 food preparation sites upon their individual requests during the contract year. Frequency of delivery ranges from weekly to monthly depending upon the needs of the individual program. Average monthly usage of commodity foods statewide is 6000 cases of dry and frozen foods.

Elder Affairs has also implemented the commercial food distribution program to obtain other services for the Elderly Nutrition Program in addition to the warehousing and distribution of commodity foods. These "other services", which will not be paid for by Elder Affairs as part of this contract, include the storage and distribution of non-commodity food products purchased directly by the 83 food preparation sites from food brokers for use in meal preparation. SEE GROUP PURCHASING PROGRAM

Through the combined purchasing power of the Massachusetts Elderly Nutrition Program, the Commonwealth expects that individual nutrition programs will be able to obtain certain food products on favorable terms through arrangement with the commercial food distributor selected for the commodity distribution program . SEE EOEA-PI-98-15 USE OF STATE NUTRITION PURCHASING PROGRAM

COMMONLY ASKED QUESTIONS ABOUT USDA COMMODITY:

1. What is the USDA commodity foods program? What are the advantages?

The USDA Commodity foods program provides food (and cash) to Elderly Nutrition Programs. The purpose of the program, which is authorized in the Older Americans Act, was to benefit both the American farm economy and the elderly by offering an outlet for use of domestically produced farm surplus and providing a vehicle to improve the diets and well being of senior citizens.

USDA provides the food to Elderly Nutrition Programs at prices that are typically below market prices. The States Executive Office of Elder Affairs pays the USDA for the food, on behalf of the individual nutrition projects. When a caterer uses the USDA food he must pay (credit) the nutrition project for the value of the food used. This program benefits the nutrition project by allowing them to receive credits from their caterer or to save money on food costs if they are a central kitchen. The USDA also provides them with a per-meal reimbursement (cash). The advantages of the USDA commodity foods program to the caterer is that he can purchase food at below market prices.

2. What is the difference between the entitlement and bonus foods? Does it make any difference to the caterer.

The Massachusetts Elderly Nutrition Program is part of the cash and commodities program under the USDA. This means that we receive both cash and commodity food from USDA. As state, we receive approximately \$0.5676 per meal from the USDA. With this money, Elder Affairs "buys" entitlement food from USDA, pays for some commodities to be processed, and pays for other related services.

Once a year, Elder Affairs places an order of entitlement food with the USDA for the coming year. Since we provide each nutrition project with \$0.40 per meal in cash, there is a limit to the amount of foods we can put onto the "grocery list". The foods that are selected are those that are most popular or coast-efficient for the elderly programs.

On the other hand, USDA designates certain foods as bonus, States that have had high enough commodity usage the year before may receive these bonus foods.

It makes no difference to the caterer whether a food is bonus or entitlement. In both cases, they credit the nutrition project for the value of the food,

3. Does it matter what commodities I use?

Yes, it does. The amount of food ordered each year and the amount of food designated for processing is based on two main factors:

- input of the commodity Task Force, and
- the estimated usage based on how often each commodity will be used.

Therefore, it does matter what commodities you use.

4. How are the prices of the commodities determined?

USDA sets the prices for the commodities each year, The foods are bought by USDA from farmers at extremely competitive prices. Generally, the prices of the commodities are below market prices for foods.

5. What are the advantages of the distribution system?

- a) Increased commodity usage due to weekly deliveries of commodities.
- b) Cost savings.
- c) Accurate inventories helps with menu planning.
- d) Easier monitoring of caterers credits.

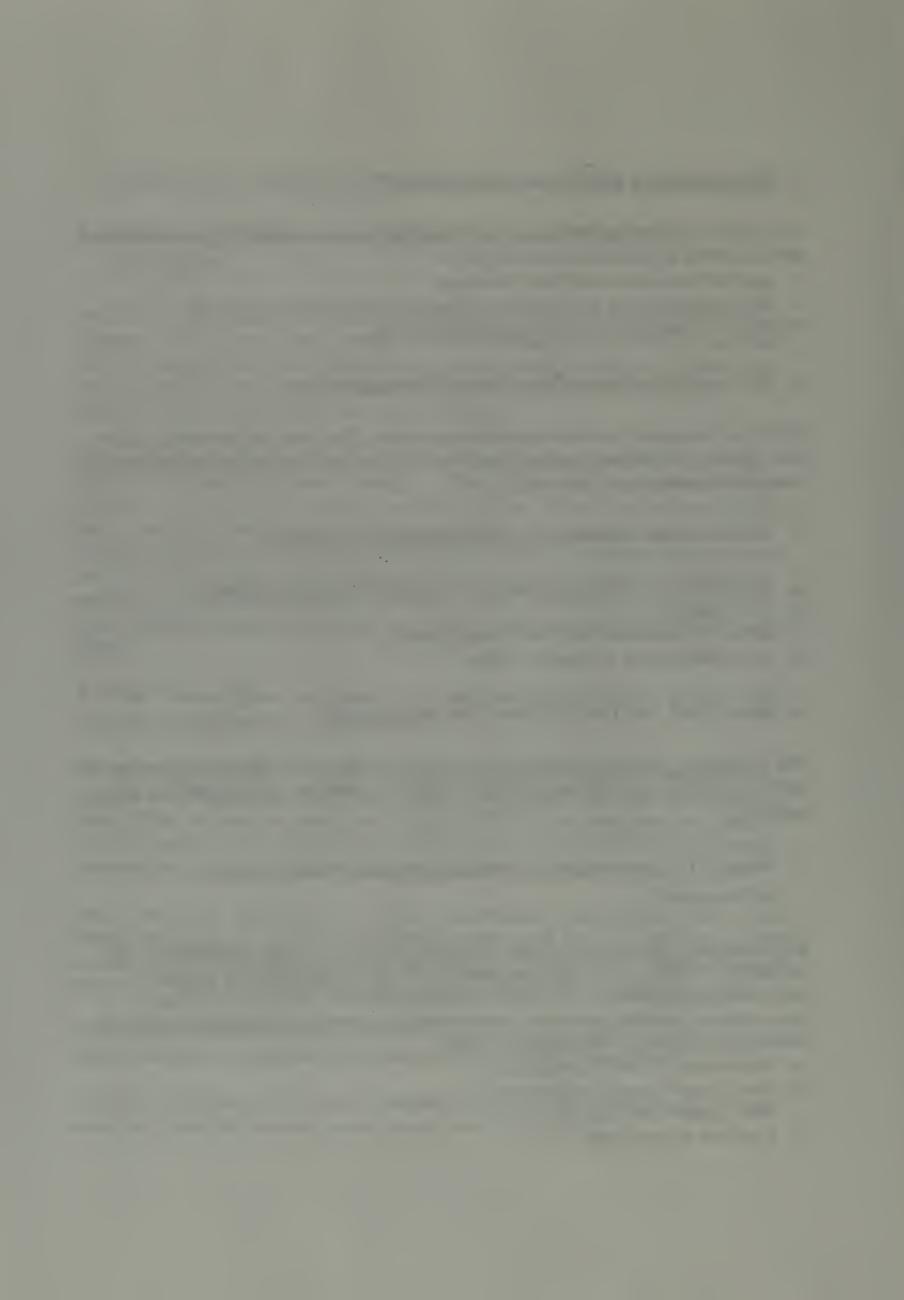
6. How much will this program cost my caterer?

The commodity foods program has no direct costs to the caterer. Rather, the caterer is able to save money on raw food by obtaining the commodities at prices that are below market.

7. What is the commodity processing program? What are the advantages?

The commodity processing program is program designed to make maximum use of commodity products. The processed products are specially designed to meet the nutritional requirements of the elderly nutrition program. At least once per year a taste-testing of possible processed commodities is performed. Participants include the commodity Task Force and volunteer elders.

- a) The advantages of this program are:
- b) Cost savings due to less labor required.
- c) More creative menu items.
- d) To obtain a better yield.



Massachusetts

Elderly Nutrition Program

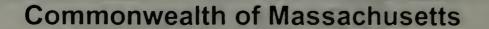


Fiscal Year 2002 Annual Report

Preparing Today for Everyone's Tomorrow!



Mitt Romney, Governor Kerry Healy, Lieutenant Governor Jennifer Davis Carey, Secretary



Executive Office of Elder Affairs

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This report was designed and prepared by Lisa Pepin, Dietetic Intern and Master's Student, Simmons College

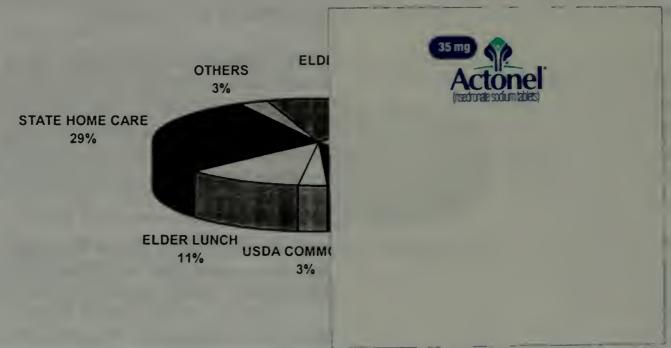
Commonwealth of Massachusetts **Executive Office of Elder Affairs** Mission & Philosophy * The Nutrition Program for the Elderly is the largest community nutrition service program for older Americans administrated by the Administration on Aging of the US Health and Human Services, through Title III-C of the Older American Act (OAA), and the third largest program operated by the Commonwealth's Executive Office of Elder Affairs. *Twenty-seven nutrition projects located throughout the state serve more than 8.5 million meals to seniors each year. Meals are provided at more than 400 congregate meal sites and are delivered to frail elders in their homes. More than half of the total meals are served to elders who are unable to leave their homes due to illness, disability, or frailty. These services are an integral part of the home and community-based care programs communities are developing to assist older persons in maintaining independence so that they may continue to reside in their own homes for as long as possible. * Nutrition services help to address a number of problems faced by many elders, including poor diets, health problems, food insecurity, and loneliness. Nutrition sites are designed for

- * Nutrition services help to address a number of problems faced by many elders, including poor diets, health problems, food insecurity, and loneliness. Nutrition sites are designed for and services are targeted to groups in the greatest need, such as low income, isolated, or minority elders.
- ★ A major goal of the Elder Affairs Nutrition Program is to provide at least one nutritionally balanced meal per day to seniors either at a congregate meal site or through home delivered meals. People aged 60 or older and their spouses are eligible to receive nutrition services. No income eligibility is required. A voluntary donation is requested.
- ★ The second goal of Elder Affairs Nutrition Services is to reduce the loneliness that many isolated elders may feel by means of the social interaction and companionship opportunities provided by congregate dining sites.
- ★ Each meal contains at least 1/3 of the current daily Recommended Dietary Allowance of nutrients and reflects the special dietary needs of the elderly.
- *In addition to the important dietary and social needs met by nutrition services, nutrition sites are encouraged to provide supportive services if needed and not otherwise available to participants. Such services may include information and referral, transportation, nutrition education, health screening, and recreation. Nutrition assessments and nutrition counseling are provided to home delivered meal clients at nutritional risk.

Cost Effective and Enhanced Funding Sources

Funding Sources for FY 2001

STATE HOME CARE (State)	29%
TITLE III C (Federal)	28%
ELDER CONTRIBUTION	16%
USDA CASH AND COMMODITY FOODS (Federal)	11%
ELDER LUNCH (State)	11%
LOCAL/COMMUNITY	2%
OTHERS	3%



Based on twelve months costs and resources in Fiscal year 2001 from October 2000 through September 30, 2001 as reported by the twenty-seven nutrition projects. Total meals provided to the elderly for the year were 8,523,311, and total expenditures were \$37,771,879. (Average per meal rate \$4.43 - same rate as 1997)

Another in-kind contribution from the elders is volunteer services. There are approximately 7,000 senior volunteers working for the Nutrition projects. We estimate a total of 400,000 hours manpower realized from senior volunteers. Without these volunteer services, the program would be in jeopardy.

★USDA Commodity Program

The USDA Commodity Program strives to obtain the best value and quality products for the state Elderly Nutrition Program. Massachusetts is the only state that uses USDA commodity statewide. In FY 2002 the program purchased over \$1,500,000 in commodity foods. Commodity foods are purchased rates approximately 10% lower than market price. Purchasing the same amount of food at market price would have cost \$1,650,000. All savings are returned to the program as a funding source from the caterers.

The USDA Commodity Program also receives USDA bonus products. For FY 2002, the state received around \$90,000 worth of bonus products from the USDA. The 10% commodity savings (\$150,000) plus the USDA bonus products (\$90,000) amounts to a total of \$240,000 savings for FY 2002. These efficiencies allow the Elderly Nutrition Program to stretch its money further to serve more meals while remaining within budget.

★USDA Commodity Commercial Distributor Program

The USDA Commodity Commercial Distributor Program strives to increase commodity usage and product availability. By purchasing commodity foods, this program lowers caterers' capital expenses and further helps to lower meal cost. The program also strives to increase local small caterers' bidding opportunities and to control inventory better. The program seeks to increase savings by combining warehousing and transportation costs. These savings have averaged about 5 cents per meal (\$450,000/yr).

This program started in FY 90, and has increased commodity use from 13 cents per meal to approximately 20 cents per meal. Contracts are put out to bid every five years. Currently, the contracts must be renewed in FY 2005. Selection criteria of each bid includes price, facilities sanitation, past experience, and potential for growth.

★USDA Commodity Processing Program

The USDA Commodity Processing Program strives to use bonus products better and to lower labor costs and thereby lower total meal costs. Within a larger framework of seeking to provide more economy, other programmatic goals include promotion of higher nutrition values and prevention of cross contamination.

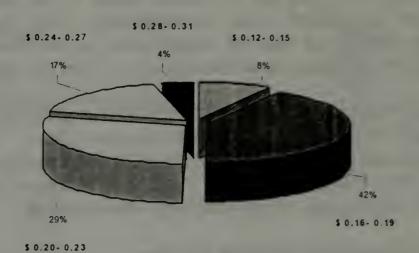
All contracts are bid every 5 years. Selection criteria include taste, nutrition analysis, cost, convenience for packaging, end data report, past experience, and reputation. Selection committee includes a nutritionist, program directors, and kitchen managers.

The new FY 2002 process items include:

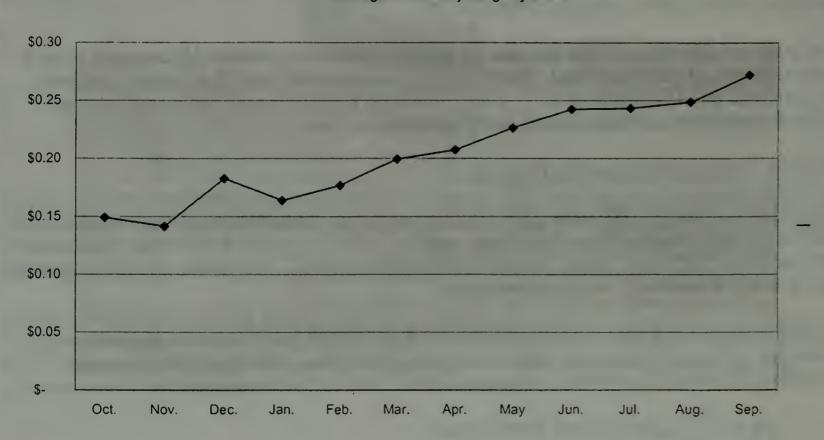
Muffins, apple, low fat
Muffins, blueberry, low fat
Muffins, peach, low fat
Apricot tango Smoothie
Blueberry smoothie
Cherry smoothie
Stuffed cabbage
Stuffed peppers
Swedish meatballs
Tyson roasted chicken quarters

Fiscal Year 2002

Commodity Usage of Regular Meals



Average Commodity Usage by Month



*Statewide Bulk Purchasing Program

The statewide bulk-purchasing program strives to use the state elderly nutrition program's combined purchasing power (8.5 million meals a year) to obtain better quality at reduce prices. Though this program is one of 'bulk-buying', it requires no state dollars. Processes and vendors are set by Elder Affairs, and the selection criteria are based on the product's taste, price, nutrition value, and brand reputation. Most of the processes lock into one year and all the caterers are mandated to use the program.

In FY 2002, two new purchasing program meals were added to the Elder Nutrition Program. The first was Oliver Products, which have a higher quality packaging system for home delivered meals. Massachusetts negotiated the lowest price of in country, which will save the state approximately \$100,000 a year. The second new product added was Chef's Pantry Frozen Meals. Over 300,000 frozen meals a year are served to elders. These frozen meals serve an important role in ensuring proper nutrition for the elderly on weekends and holidays.

Other high quality products used regularly include:

Fish products from Viking Company Honey roasted chicken breast from Con Agra Company Lil' salt low fat franks from Russer Company

*Brown Bag Program

The Brown Bag Program is a monthly food distribution program that serves over 5000 elderly at 55 sites in Massachusetts. The Greater Boston Food Bank, the Western Food Bank, as well as its member organizations, administer this program. These member organizations can receive significant assistance in serving the elderly and substantial reimbursement through their association with the Massachusetts Elderly Nutrition Programs. The Brown Bag Program performs nutrition education for low-income minority populations while also conducting outreach to low income minority elders. They are able to work with food banks and nutrition projects to maximize USDA funding, and USDA commodities supplement the programs foodstuffs.

In FY 2002 Massachusetts added four Brown Bag locations in Eastern Massachusetts. These locations served approximately 1000 clients on a monthly basis, received \$180,000 worth of food and claimed 36,000 meals from the USDA.

*Farmer's Market Program

The Farmer's market is an expanded funding source that strives to promote elders' intake of fruits and vegetables. To receive funding, this program works with the Massachusetts Department of Food and Agriculture and the Department of Public Health to apply for federal grants. Moreover, the program issues an RFR to each of the state's 27 nutrition projects to provide coupons for elderly shops at roadside farm stands and by delivery to home deliver clients.

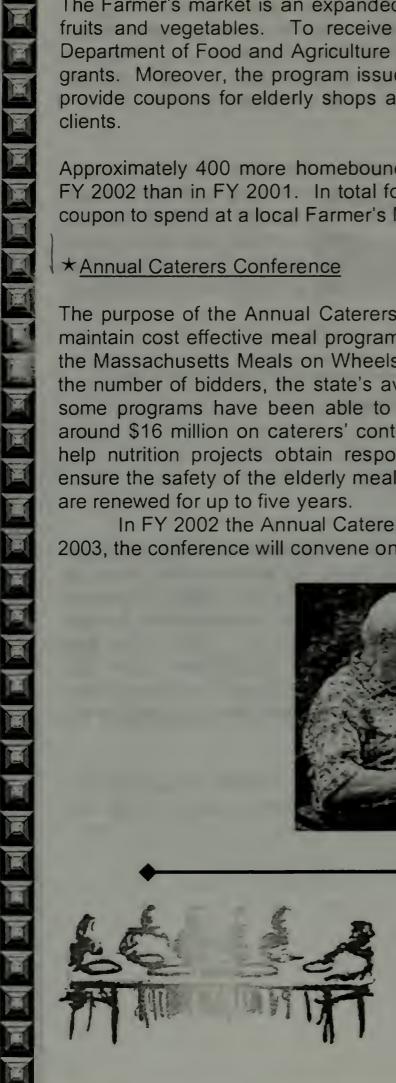
Approximately 400 more homebound elders received services from the Farmer's Market in FY 2002 than in FY 2001. In total for FY 2002, approximately 15,000 elders received a \$10 coupon to spend at a local Farmer's Market.

*Annual Caterers Conference

The purpose of the Annual Caterers Conference is to actively seek out potential bidders to maintain cost effective meal programs through competitive bidding. Elder Affairs works with the Massachusetts Meals on Wheels Association to conduct this conference. By expanding the number of bidders, the state's average meal price remains very competitive. Incredibly, some programs have been able to maintain early 1990's pricing. Massachusetts spends around \$16 million on caterers' contracts per year. There is a standard bid specification to help nutrition projects obtain responsible bids, ensure financial stability of caterers, and ensure the safety of the elderly meal program. All contracts are for a three-year period, and are renewed for up to five years.

In FY 2002 the Annual Caterer's Conference was held at Mystic Elder Services. In FY 2003, the conference will convene on April 24th at Worcester State College.





Meal Quality, Safety, and Nutrition Standards

★ Statewide Nutrition Standards

The objective of the statewide nutrition standards are to promote nutrition program's food quality and nutrition standards while maintaining high standards of food safety and kitchen sanitation. Elder Affairs issues nutrition, food safety, and sanitation standards. All nutrition projects statewide must comply and submit the quality assurance protocols. Massachusetts among the few states with a statewide nutrition standard and is the first state to incorporate USDA dietary guidelines into the standards. The AoA Nutrition Research Center has adopted some Massachusetts nutrition standards as part of the national standard tools.

★ Massachusetts Elderly Nutrition Program Standards

The Federal Regulations governing the Nutrition program for the Elderly require that each meal served must contain at least one-third of the current Recommended Dietary Allowances (RDA) for males 51 years+ as established by the Food and Nutrition Board of the National Academy of Science, National Research Council.

The Massachusetts Elderly Nutrition Program developed specific nutrition standards for each meal served to meet the US Dietary Guidelines:

- The caloric range per meal must fall between 700-800 calories.
- The fat content, based on total calories, must not exceed 30-35%.
- The **sodium** content of the meal must fall within the range of a **No Added Salt** diet (3-4 gm/day).

Massachusetts Elderly Nutrition Program Average Meal Nutrient Analysis for 4th Quarter, 2001 (24 sites out of 26, 92%)

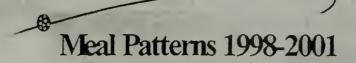
Nutrients		RDA Values	1/3 RDA	MA Average Values	Comparison %
Calories	Kcal	2000	660	718	109
Protein	G	63	20.79	37	178
Fat	G	67	22.11	24	108
% Fat	%	30	30	32	107
Fiber	G	24	7.92	7	88
Cholesterol	Mg	300	99	86	87
Vit A	IU	5000	1650	2,799	170
B6	Mg	2	0.66	1	151
B12	mcg	2	0.66	2	303
Vit C	Mg	60	19.8	59	298
Vit D	IU	800	66	70	106
Thiamin	Mg	1.2 ·	0.396	1	252
Riboflavin	Mg	1.4	0.462	1	216
Niacin	Mg	15	4.95	8	162
Folate	mcg	200	66	104	185
Iron	Mg	10	3.3	5	151
Calcium	Mg	800	264	460	174
Na	Mg	2400	792	1,030	130

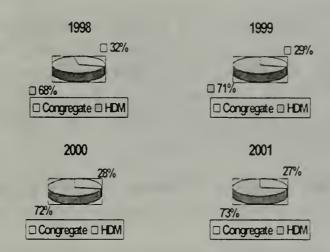
The Massachusetts Elderly Nutrition Program showed that meal averages exceed the 1/3 RDA for all nutrients listed in Table 1.

Meal Patterns

In the past two decades meal patterns, in terms of the relative percentages of congregate and home delivered meals, have greatly shifted. In the 1980's approximately 60% of meals served were in a congregate setting and approximately 40% of meals were home delivered. The meals pattern shows a steady decrease in the percentage of congregate meals served, and a steady increase in home delivered meals. The most updated data from FY 2001 shows that only 27% of meals were served as congregate meals, while 73% of meals were home delivered.

This increase in the percentage of home delivered meals over the last two decades indicates that the population of frail, disabled, and ill elders is increasing, which leaves them homebound and unable to join others in a congregate meal setting. This increasing population of homebound elders emphasizes how important home delivered meals are in providing proper nutrition to keep our elders healthy and independent in their own homes.





★Quality Assurance Reporting Protocol

Massachusetts is one of the few states in the country that has a qualified dietitian on each nutrition project: 27 dietitians at each of the 27 nutrition projects. In FY 2002, the project nutritionists planned, reviewed, and approved 804 menus, performed 60 kitchen inspections, and conducted 600 nutrition education trainings.

The information collected includes: Menu checklist, kitchen inspection reports, nutrition education schedules and topics, quarterly nutrient analysis, commodity usage reports, and nutrition assessment reports. Elder Affairs then receives the information electronically and formulates appropriate recommendations for each project.

In the past all information was sent to the Nutrition Program on hardcopy through the mail. Recently a computer reporting system was put into place to ensure that quality assurance protocols are complied with and the nutrition standards of the menus are followed. The computer reporting system now allows information to be sent to Elder Affairs via email. This reporting system has many benefits including collection speed and efficiency along with an easier and more accurate analysis of the data. The Elder Nutrition Program is still in the process of working on and improving this computer reporting system.

*Statewide Sanitation Training

In FY 1990 sanitation codes were passed that required all food establishment employees to take *ServeSafe* training. However, due to the impracticality of having the majority of elder employees at meal sites take this training, Elder Affairs worked with the Department of Public Health to issue a training curriculum for nutrition projects to apply for variances from local boards of health. This Statewide Sanitation Training strives to ensure sanitation standards, maintains existing work force, and assures cost effective programs. All meal site supervisors (400) have to receive this training yearly. The statewide sanitation training system has helped the state save approximately \$400,000 on the registration fees of *ServeSafe* training. To date, the nutrition project has received more than 85% variances from their local Boards of Health.

Operational Technical Support

*Technical Assistance

The goal of Technical Assistance offered is to help the Elderly Nutrition Project with various food and nutrition issues. They are aimed toward educating the general public about older consumers' special concerns regarding food safety and sanitation issues, and to raise the older workers' awareness of food and sanitation issues. Routine aspects of our technical assistance efforts include receiving and distributing product recall information, and disseminating educational materials to all CoAs.

Operational technical support works as a liaison among program participants, legislators, other government agencies, local government, private sectors, and nutrition projects.

Program development for operational technical support includes these initiatives: A future packaging committee, new kitchen development, and product testing

*Member of the Massachusetts Partnership Sanitation Education

In our capacity as a member of the Massachusetts Partnership for Sanitation Education Elder Affairs will develop educational training material for food service workers. Elder Affairs also advocates for older consumers on sanitation issues within public and private sectors.

The partnership, which includes the Food & Drug Administration, UMass Extension Services, USDA, Department of Education, Massachusetts Restaurant Association, and the Stop & Shop grocery chain, meets monthly. Sanitation training materials are issued to all food service establishments statewide in ten different languages. The Massachusetts Partnership for Sanitation Education also participates in the Massachusetts Restaurant annual exhibition.

*Monthly Nutrition Directors Meeting

The goal of the monthly nutrition director meetings is to communicate with nutrition project directors relative to updated federal and state regulations and to discuss local issues concerning topics such as USDA Commodities, budget updates, future trends of elderly nutrition and consumer sanitation needs. As of January 2003, a quarterly meeting schedule was changed to one of monthly meetings.

★ Program Instruction for FY 2002

06/01/01	EOEA-PI-01-26	State Sanitary Code for Food Establishments ("the code")
01/02/02	EOEA-PI-02-02	Monthly Nutrition Report Revision
03/14/02	EOEA-PI-02-12	FY 2003 Nutrition Caterer's Bid Specifications For The
		Massachusetts Nutrition Program for the Elderly
08/16/02	EOEA-PI-02-38	Sanitation Training Curriculum
08/16/02	EOEA-PI-02-39	Sanitation and Food Safety Standards
08/30/02	EOEA-PI-02-42	Title III-C Nutrition Services Standards Invoice
09/18/02	EOEA-PI-02-48	USDA Cash Program – Federal Fiscal Year 2003



Other Nutritional Services

Nutrition Education, Medical Nutrition Therapy, and Counseling

*Member of the Mass Nutrition Board

As a member of the Mass Nutrition Board, Elder Affairs serves on the governor's nutrition advisory board as elder advocates and to advise the governor on various nutrition issues. There are monthly meetings, with Gubernatorial nominees and various agencies' nutrition representatives, to discuss and exchange information regarding nutrition issues in the state. Elder Affairs works with these different agencies on elder nutrition and publishes the state nutrition status report.

*Statewide Nutrition Campaign

The goal of the Statewide Nutrition Campaign is to promote important nutrition messages on a statewide level. The Nutrition Elder Project works with the Administration on Aging, Tufts University, Mass Water Resource, and the Massachusetts Nutritionist Association to plan the training curriculum.

In FY 01, the 'Water-The Foundation of Life' Campaign reached 325 councils on Aging and conducted 20 training sessions across the Commonwealth.

*Simmons College Dietetic Internship Program

Each year, Elder Affairs acts as a preceptor in the American Dietetic Association approved Dietetic Internship Program at Simmons College. Elder Affairs helps new dietetic interns better understand community nutrition services. An average of 6 students per year have the opportunity to work with the Elderly Nutrition Program. About 70% of all dietetic interns completing the program have worked at a community nutrition program in various states. Presently two graduates work for Massachusetts elderly nutrition projects.

*Quarterly Nutritionist Meetings

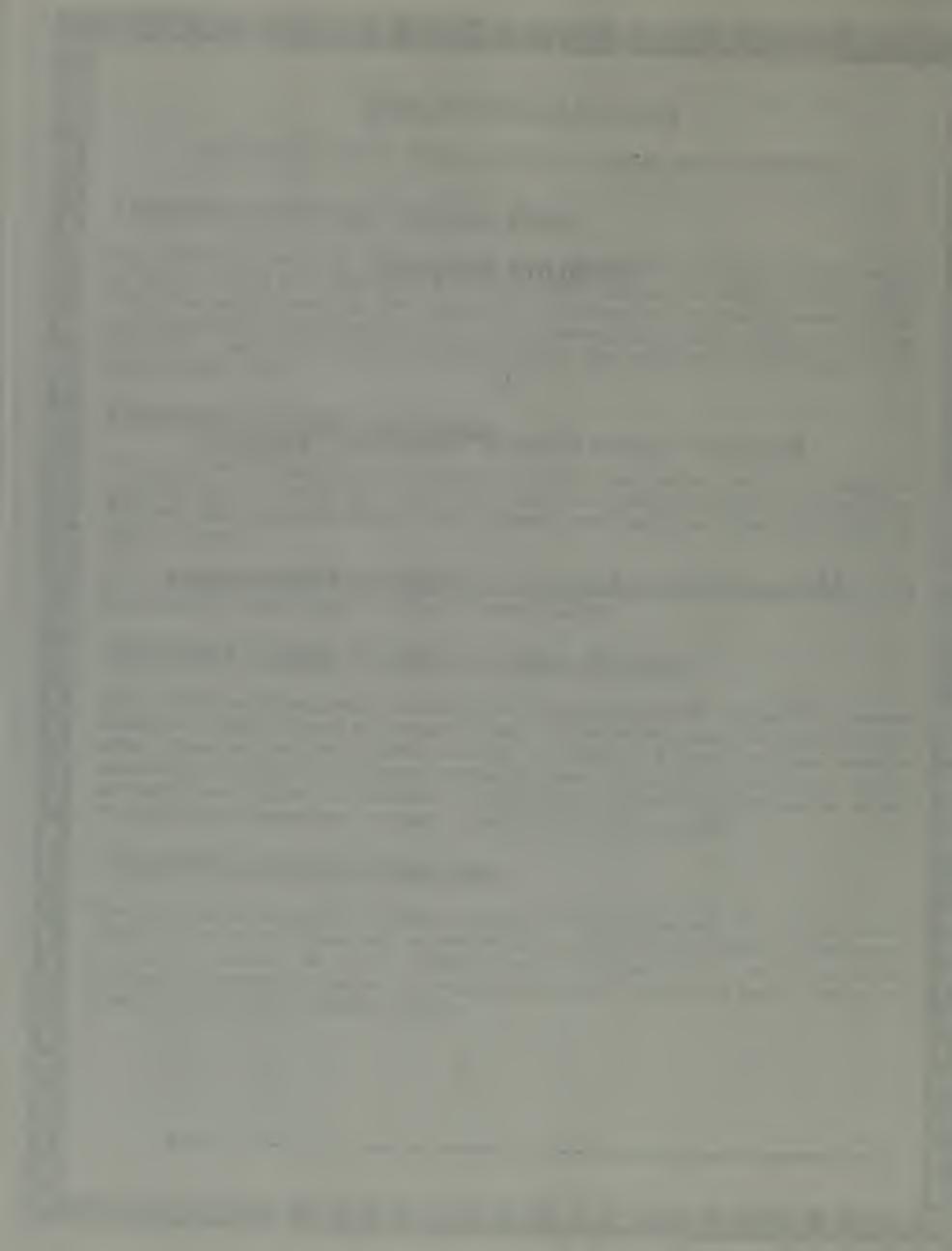
The EOEA conducts quarterly nutrition meetings to communicate with the nutrition project nutritionists on various topics such as updated DRI's, nutritional requirements of elder meals, and latest research. All topics, including those discussed above, are taken under consideration in order to continuously improve the quality of meals and services offered to elders through the Elder Nutrition Program.

Sample Menus

For

Massachusetts Elderly Nutrition Program

Massachusetts Executive Office of Elder Affairs



Menu Cost Analysis

Week 1	Item	Portion	Brand	Cost
Monday	Baked Chicken Breast Quarter	1 each		
	Gravy	2 Tbsp		
	Cranberry Sauce	1 Tbsp		
	Sweet Potatoes	1/2 cup		
	Corn on cod	1 each		
	Oatmeal Roll	1 each		
	Banana Pudding	1/2 cup		
	Milk	8 ounces		
	Margarine	1 pat		
	Total	T pat		
Tuesday	Sweet & Sour Pork	3 oz Pork		
1 desday	Fluffy Rice	1/2 cup		
	Broccoli	1/2 cup		
	Dinner Roll	1 each		
	Peaches	1/2 cup		
	Milk	8 ounces		
	Margarine	1 pat		
	Total	1 pat		
Wadnasday	Chialran Datty	3 ounces		
Wednesday				
	Supreme sauce	2 Tbsp		
	Oven Brown Potatoes	1/2 cup		
	Carrots	1/2 cup		
	Whole Grain Bread	1 piece		
	Fruit Smoothie	1 each		
	Milk	8 ounces		
	Margarine	1 pat		
	Total			
hursday	Split Pea Soup	1/2 cup		
	Crackers	1 pkg	•	
	Baked Meatloaf	4 ounces		
	Gravy	2 Tbsp		
	Onion Mashed Potatoes	1/2 cup		
	Wheat Bread	1 piece		
	Pineapple	1/2 cup		
	Milk	8 ounces		
	Margarine	1 pat		
	Total			
Friday	Baked Fish	3 ounces		
	Tartar Sauce	1 Tbsp		
	Delmonico Potatoes	1/2 cup		
	Brussel Sprouts	1/2 cup		
	Multigrain Roll	1 piece		
	Lemon Fruited Jello	1/2 cup		
	Milk	8 ounces		
	Margarine	1 pat		
	Total			

		Menu Cost Analysis		
	Item	Portion	Brand	Cost
W1-2				
Week 2 Monday	Chicken Stew	6 oz ladle	-	
Monuay	Diced Chicken	3 ounces		
	Peas & carrots			
	Boiled potatoes	1/2 cup		
		1/2 cup		
	Baking Powder Biscuits Mixed Fruit	l each		
	Milk	1/2 cup		
		8 ounces		
	Margarine	l pat		
	Total			
Tuesday	Tomato Vegetables Soup	1/2 cup		
	Crackers	l pkg.		
	Baked Veal Patty	3 ounces		
	Gravy	2 Tbsp		
	Mashed Potatoes	1/2 cup		
	Multigrain Bread	1 slice		
	Fresh Strawberries	1/2 cup		
	Milk	8 ounces		
	Margarine	l pat		
	Total	1 pat		
	Total			
Wednesday	Baked Ham	3 ounces		
	Raisin Sauce	2 Tbsp		
	Dill Potatoes	1/2 cup		
	Carrots	1/2 cup		
	Dinner Roll	1 each		
	Brownie	1 each		
	Milk	8 ounces		
	Margarine	1 pat		
	Total			
Thursday	Sloppy Joe	3 ounces meat		
	Mashed Potatoes	1/2 cup		
	Tossed Salad	1/2 cup		
	Salad Dressing/Packet	.75 ounce		
	Hamburger Roll	1 each		
	Peach Crisp	1/2 cup		
	Milk	8 ounces		
	Margarine	1 pat		
	Total			
Enidor	Pagetad Chielean Las Ouerte	1 anah		
Friday	Roasted Chicken Leg Quarter Gravy	1 each 2 Tbsp		
	Cranberry Sauce	1 Tbsp		
	Rice Pilaf	1/2 cup		
				
	Spring Blend Vegetables Whole Wheat Bread	1/2 cup		
		1 slice		
	Tapioca Pudding	1/2 cup		
	Milk	8 ounces		
	Margarine	1 pat		

		Meal Cost Analysis		
	Item	Portion	Brand	Cost
Week 3	34 4 0	4		
Monday	Meat Sauce	4 oz		
	Ziti	1/2 cup		
	Parmesan Cheese	1 Tbsp/.5 oz		
	Tuscany Blend Vegetables	1/2 cup		
	Scali Bread	1slice		
	Fruit Compote (Peach/Raisin)	1 each		
	Milk	8 ounces		
	Margarine	1 pat		
	Total			
Tuesday	Baked Chicken Breast Quarter	1 each		•
	Mushroom Gravy	2 Tbsp		
	Cranberry Sauce	1 Tbsp		
	Mashed Potatoes	1/2 cup		
	Green Beans	1/2 cup		
	Light Rye Roll	1 each		
	Pineapple	1/2 cup		
	Milk	8 ounces		
	Margarine	1 pat		······
	Total			
Wadnasday	Juice	4 ounces		
Wednesday	Broccoli Cheese Bake	8 oz wt	•	
	Brown Rice			
	Whole Grain Bread	1/2 cup 1 slice		
	Butterscotch Pudding	1/2 cup		
	Whipped Topping Milk	1 Tbsp 8 ounces		
	Margarine Total	1 pat		
Thursday	Roasted Sliced Turkey	3 ounces		
	Gravy	2 Tbsp		
	Cranberry Sauce	2 ounces		
	Mashed Potatoes	1/2 cup		
	Butternut Squash	1/2 cup		
	Blueberry Muffin	1 each		
	Apple	1 each		
	Milk	8 ounces		
	Margarine	1 pat		
	Total			
Friday	Cream of Spinach Soup	1/2 cup		
Tilday	Baked Fish	3 ounces		
	Lemon Wedge	1/8		
	Baked Potato	l each		
	Multigrain Roll	1 each		
	Lemon Square	1/2 cup		
	Milk	8 ounces		
	Margarine Total	1 pat		

	Item	Meal Cost Analysis Portion	Brand	Cost
			Diana	Cost
Week 4	D 1 D 1			
Monday	Pork Rib	2.5 - 3ounces		
	BBQ Sauce	2 Tbsp		
	Fluffy Rice	1/2 cup		
	California Style Vegetables	1/2 cup		
	Stone Ground Bread	1slice		
	Applesauce	1/2 cup		
	Milk	8 ounces		
	Margarine	1 pat		
	Total			
Tuesday	Shepherd's Pie	8 oz wt.		
	Ground Beef /	3 oz		
	Mashed Potatoes	4 oz		
	Chuck Wagon Corn	1/2 cup		
	Dark Rye Bread	1 slice		
	Oatmeal Cookie	1 each		
	Milk	8 ounces		
	Margarine	1 pat		
	Total			
Wednesday	Yankee Bean Soup	1/2 cup		
	Crackers	1 pkg		
	Roasted Chicken Leg Quarter	1 each		
	Cranberry Sauce	1 Tbsp		
	Carrots	1/2 cup		
	Corn Bread	1 square		
	Raisins	1 box		
	Milk	8 ounces		
	Margarine	l pat		
	Total			
Thursday	Pot Roast (Roast Beef)	2 000000		
2 mar suay	Gravy	3 ounces		
	Mashed Potatoes	2 Tbsp 1/2 cup		
	Peas & onions			
	Whole Wheat Bread	1/2 cup 1 slice		
	Cantaloupe			
	Milk	1/2 cup 8 ounces		
	Margarine	· · · · · · · · · · · · · · · · · · ·		
	Total	1 pat		
Friday	Vegetable Lasagna	0 == (-4)		
Tilday	Zucchini/Stew Tomatoes	8 oz (wt)		
	Multigrain Roll	1/2 cup		
		1 each		
	Frosted Cherry Chip Cake (Birthday)	2x2 sq		
	3 6111			
	Milk	8 ounces		
	Milk Margarine	8 ounces 1 pat		

Massachusetts Elderly Nutrition Projects

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*AREA AGENCY ON AGING

(Revised: 12/02)

Massachusetts Elderly Nutrition

Age Center of Worcester 51 Harvard Street Worcester, MA 01609 (508) 755-4388 FAX: 508-751-4807

Auburn, Barre, Boylston, Grafton, Hardwick, Holden, Leicester, Millbury, New Braintree, Oakham, Paxton, Rutland, Shrewsbury, West Boylston, and Worcester

Nutrition Project Director: Bill Cutler Nutritionist: Susan Burchman, R.D.

*Bristol Elder Services, Inc. 182 North Main Street Fall River, MA 02720 (508) 675-2101 FAX (508) 679-0320 Attleboro, Berkley, Dighton, Fall River, Freetown, Mansfield, North Attleboro, Norton, Raynham, Rehoboth, Seekonk, Somerset, Swansea, Taunton, and Westport

Nutrition Project Director; Karen M. Cote

Nutritionist: Debbi Trombly

*Chelsea/Revere/Winthrop Home Care Center, Inc. 300 Broadway / P.O. Box 189 Revere, MA 02151 (781) 286-0550 FAX: (781) 286-8831

Chelsea, Revere, Winthrop

Nutrition Project Director : Carol Nestor

Nutritionist: Carol Nestor

*Coastline Elderly Services, Inc. 1646 Purchase Street New Bedford, MA 02740 (508) 999-6400 FAX: (508) 993-6510

Acushnet, Dartmouth, Fairhaven, Gosnold, Marion, Mattapoisett, New Bedford, and Rochester

Nutrition Project Director: Philip Beard

Nutritionist: Philip Beard R.D.

Council on Aging Town of Belchertown 7 Bershire Avenue, P.O.Box 881 Belchertown, MA 01007 (413) 323-0420 Fax (413) 323-0468

COA Director: William Korsenowski

Nutritionist: Chris Brown

*Elder Services of Berkshire County, Inc. 66 Wendell Avenue Pittsfield, MA 01201 (413) 499-0524

Toll Free: (800) 544-5242 FAX: (413) 442-6443

Nutrition Program Director: Roger Suters

Nutritionist: Karen Blessin RD

Adams, Alford, Becket, Cheshire, Clarksburg, Dalton, Egremont, Florida, Great Barrington, Hancock, Hinsdale, Lanesborough, Lee, Lenox, Monterey, Mount Washington, New Ashford, New Marlborough, North Adams, Otis, Peru, Pittsfield, Richmond, Sandisfield, Savoy, Sheffield, Stockbridge, Tyringham, Washington, West Stockbridge, Williamstown,

Windsor

*Elder Services of Cape Cod and the Islands, Inc. 68 Route 134 South Dennis, MA 02660 (508) 394-4630

Toll Free: 800-244-4630 On Cape Cod Toll Free: 800-442-4492 Off Cape Cod

FAX: (508) 394-3712

Barnstable, Bourne, Brewster, Chatham, Chilmark, Dennis, Eastham, Edgartown, Falmouth, Gay Head Harwich, Hyannis, Mashpee, Nantucket, Oak Bluffs, Orleans Provincetown, Sandwich, Tisbury Truro, Vineyard Haven, Wellfleet, West Tisbury, and Yarmouth

Nutrition Program Director: Mary Rolanti

Nutritionist: Tina Finesilver R.D.

*Franklin County Home Care Corporation 330 Montague City Road

Turners Falls, MA 01376

(413) 773-5555

FAX: (413) 772-1084

Ashfield, Athol, Bernardston, Buckland, Charlemont, Colrain, Conway, Deerfield, Erving, Gill, Greenfield, Hawley, Heath, Leverett, Leyden, Monroe, Montague, New Salem, Northfield, Orange, Petersham

Phillipston, Rowe, Royalston, Shutesbury, Sunderland, Warwick, Wendell, Whately

Nutrition Director: Richard Nault Nutritionist; Cynthia Rothschild, R.D. *Greater Lynn Senior Services, Inc. 8 Silsbee Street Lynn, MA 01901 (781) 599-0110

FAX: (781) 592-7540

Lynn, Lynnfield, Nahant, Saugus, and Swampscott

Nutrition Program Director; Phyllis Kinson LDN

Nutritionist: Ellen Goldman RD

*Greater Springfield Senior Services, Inc. 66 Industry Avenue Springfield, MA 01104 (413) 781-8800

FAX: (413) 781-0632

Agawam, Brimfield, East Longmeadow, Hampden, Holland, Longmeadow, Monson, Palmer, Springfield, Wales, West Springfield, Wilbraham

Nutrition Project Director: Laurie Cassidy Nutritionist: Linda Galarneau, D.T.R.

*Health & Social Services Consortium Inc. (HESSCO) One Merchant Street Sharon, MA 02067 (781) 784-4944

Toll Free: 800-462-5221 FAX: (781) 784-4922

Canton, Dedham, Foxborough, Medfield, Millis, Norfolk, Norwood, Plainville, Sharon, Walpole, Westwood, and Wrentham

Nutrition Project Director; Chandra Ganapathy

Nutritionist: Chandra Ganapathy RD

*Highland Valley Elder Services, Inc. 320 Riverside Drive

Northampton, MA 01062

(413) 586-2000

Toll Free: (800) 322-0551 FAX: (413) 584-7076

Nutrition Director: Nancy Mathers

Nutritionist : Rachel Keim

Amherst, Blandford, Chester, Chesterfield, Cummington, Easthampton, Goshen, Granville, Hadley, Hatfield, Huntington, Middlefield, Montgomery, Northampton, Pelham, Plainfield, Russell, Southampton, Southwick,

Westfield, Westhampton,

Williamsburg, and Worthington

Kit Clark Senior house 1500 Dorchester Avenue Dochester, MA 02122 (617) 825-5000 Kitchen (617) 265-6046 Fax 617 288-5991 Beacon Hill/WestEnd, Charlestown, Chinatown, Columbia Point, Dorchester, East Boston, East Mattapan, North End, Allston, Back Bay, Brighton, Fenway, Jamaica Plain, North Dorchester, Parker Hill, Roxbury, South end, Hyde Park, South Jamaica Plain, Roslindale, West Roxbury, and West Mattapan

Nutrition Project Director: Sandy Albright Director of Food Service: Cicely Stetson Nutritionist: Elizabeth Bradley R.D.

Marrimack Valley Nutrition Project.
Greater Lawrence Regional Technical High School
57 River Road
West Andover, MA 01810
(978) 686-1422
FAX: (978) 681-7783

Amesbury, Andover, Billerica,
Boxford, Chelmsford, Dracut,
Dunstable, Georgetown, Groveland,
Haverhill, Lawrence, Lowell,
Merrimack, Methuen, Newbury,
Newburyport, North Andover,
Rowley, Salisbury, Tewksbury,
Tyngsborough, Westford, West Newbury,

Nutrition Project Director: Carolyn Ford

Nutritionist: Jean Lussier, R.D.

*Minuteman Home Care Corporation 24 Third Avenue Burlington, MA 01803 (781) 272-7177 FAX: (781) 229-6190 Acton, Arlington, Bedford, Boxborough, Burlington, Carlisle, Concord, Harvard, Lexington, Lincoln, Littleton, Maynard, Stow, Wilmington, Winchester, Woburn

Nutrition Project Director: Marge Scott Nutritionist; Peg Mikkola, R.D.

*Montachusett Elderly Nutrition Program 93 Fairmont Street Fitchburg, MA 01420 1-800-286-3441 (978) 345-8501 FAX: (978) 342-0855 Ashburnham, Ashby, Ayer, Berlin, Bolton, Clinton, Fitchberg, Gardner, Groton, Hubbardston, Lancaster, Leominster, Lunenberg, Pepperell, Princeton, Shirley, Sterling, Templeton, Townsend, Westminster, Winchendon

Nutrition Project Director: Mary Giannetti, R.D.

Nutritionist: Ann Lee R.D.

*Mystic Valley Elder Services, Inc. 19 Riverview Business Park 300 Commercial Street Malden, MA 02148 (781) 324-7705 TDD (781) 321-8880 FAX: (781) 324-1369 Everett, Malden, Medford, Melrose, North Reading, Reading, Stoneham, Wakefield

Regional Nutrition Project Director: Renelle Roy R.D.

Operational Manager: Brid Scharrenweber

Nutritionist: Candice Quigley, RD

*North Shore Elder Services, Inc. 152 Sylvan Street Danvers, MA 01923 (978) 750-4540 TDD: 744-4184

FAX: (978) 750-8053

Nutrition Project Director: Donna Popkin

Nutritionist: Andrea Kingsley LDN

Old Colony Elderly Services, Inc. 144 Main St., P.O. Box 4469-02303 Brockton, MA 02301 (508) 584-1561; 697-3338; 586-3700

Toll Free: (800) 242-0246 FAX: (508) 584-6005

Nutrition Director: Richard Matthews

Nutritionist; Sheila Milanese

Danvers, Marblehead, Middleton, Peabody, and Salem

Abington, Avon, Bridgewater, Brockton, Carver, Duxbury, East Bridgewater, Easton, Halifax, Hanover, Hanson, Kingston, Lakeville, Marshfield, Middleborough, Pembroke, Plymouth, Plympton, West Bridgewater, and Whitman

*SeniorCare, Inc. 5 Blackburn Center Gloucester, MA 01930-2259 (978) 281-1750 FAX: (978) 281-1753 Beverly, Essex, Gloucester, Hamilton, Ipswich, Manchester, Rockport, Topsfield, and Wenham

Nutrition Project Director: Jane Militello

Nutritionist: Linnea Hagberg R.D.

Somerville/Cambridge Elder

Services, Inc.

61 Medford Street

Somerville, MA 02143-3429

(617) 628-2601; 2602 TDD: (628-1705)

FAX: (617) 628-1085

Nutrition Operational Manager: Cheryl Hewitt RD.

Nutritionist: Andrea Libertini RD

South Middlesex Opportunity Council

300 Howard Street

Framingham, MA 01701

(508) 872-6579 (508) 872-6570

FAX: (508) 620-2304

Ashland, Dover, Framingham, Holliston, Hopkinton, Hudson, Marlborough, Natick, Northboro, Sherborn, Southboro, Sudbury, Wayland, and Westborough

Cambridge and Somerville

Nutrition Project Director: David McCloskey

Nutritionist: Barbara Fragnoli

*South Shore Elder Services, Inc.

639 Granite Street Braintree, MA 02184

(781) 848-3910

FAX: (781) 843-8279

Braintree, Cohasset, Hingham, Holbrook, Hull, Milton, Norwell, Quincy, Randolph, Situate, and

Weymouth

Nutrition Project Director: Jayne Davis

Nutritionist: Jayne Davis.

Tri-Valley Elder Services, Inc. Larchar-Branch Building 251 Main Street Webster, MA 01570 (508) 949-6640

Toll Free: (800) 286-6640

FAX: (508) 949-6651

Bellingham, Blackstone, Brookfield, Charlton, Douglas, Dudley, East Brookfield, Franklin, Hopedale, Medway, Mendon, Milford, Millville, Northbridge, North Brookfield, Oxford, Southbridge, Spencer, Sturbridge, Sutton, Upton, Uxbridge, Warren, Webster, and West Brookfield

Nutrition Project Director: Carol Muschler

Nutritionist: Sue Burchman RD

*WestMass ElderCare, Inc. 4 Valley Mill Road Holyoke, MA 01040 (413) 538-9020 Belchertown, Holyoke, Ludlow, South Hadley, Ware, Chicopee and Granby

FAX: (413) 538-6258

Nutrition Projector Director: Lisa Lovell

Nutritionist: Chris Brown

FAX: (617) 926-9897

*West Suburban Elder Services, Inc. Parker Office Building 124 Watertown Street Watertown, MA 02472 (617) 926-4100

Belmont, Brookline, Needham, Newton, Waltham, Watertown, Wellesley, Weston

Regional Nutrition Project Director: *Renelle Roy R.D.

Operational Manager: Jennifer Pereira

Nutritionist: Nancy Ross RD.

^{*}AREA AGENCY ON AGING



